# 2011 Opioid Treatment Program (OTP) Survey

Data on Substance Abuse Treatment Facilities with OTPs

#### **ACKNOWLEDGMENTS**

This report was prepared for the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS), by Synectics for Management Decisions, Inc. (Synectics), Arlington, Virginia. Data collection was performed by Mathematica Policy Research (Mathematica), Princeton, New Jersey. Work by Synectics and Mathematica was performed under Task Order HSS283200700048I/HHSS28342001T, Reference No. 283-07-4803 (Cathie Alderks, Task Order Officer).

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#### RECOMMENDED CITATION

Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program Survey: Data on Substance Abuse Treatment Facilities with OTPs. BHSIS Series S-65, HHS Publication No. (SMA) 14-4807. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2013.

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Originating Office
Center for Behavioral Health Statistics and Quality
Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road, Room 2-1084
Rockville, Maryland 20857

August 2013

## TABLE OF CONTENTS

List of Tables	V
List of Figures	x
Chapter 1 Description of the 2011 Opioid Treatment Program (OTP) Survey	1
Medication-assisted Treatment (MAT)	1
Survey Objectives	2
Data Collection Procedures for the 2011 OTP Survey	3
Data Considerations and Limitations	5
Organization of the Report	6
Terminology	6
Chapter 2 OTP Services and Characteristics	9
Facility Operation and Treatment Type	10
Type of Care Offered and Treatment Type	11
Pharmacotherapies Provided	12
OTP Medications	12
Formal Agreements for Medical Referrals	14
Facility Payment Options	15
Programs or Groups for Specific Client Types	16
Screening and Diagnostic Services	17
Care for Psychiatric Conditions	19
OTP Service Hours	21
OTP Clinical Staff Capacity	22
OTP Outpatient Travel Time	23
Chapter 3 OTP Patient Characteristics	27
Admissions in 2010	27
All Patients on March 31, 2011	28
Patient Demographics	29
Continuous Treatment	30
Patients Receiving Methadone or Buprenorphine	31
Methadone Dosage Level	
Buprenorphine Dosage Level	33
Take-home Methadone	
TABLES	37

## TABLE OF CONTENTS (CONTINUED)

Appendix A. 2011 OTP and N-SSATS Mail Survey Questionnaires	121
Appendix B. OTP Survey Methodology	147
Appendix C. Medication-Assisted Opioid Therapy: A Timeline	149
Appendix D. Item Response Rates	159
Appendix E. What is an OTP?	165

### LIST OF TABLES

Chap	ter 1	
1.1.	OTP facilities, by status and mode of response: 2011 Number and percent	5
Chap	ter 2	
2.1.	Treatment type, by facility operation: 2011 Number and percent	38
2.2.	Type of care offered and facilities where all clients were in an OTP, by treatment type: 2011  Number and percent	39
2.3.	Services provided, by facility operation: 2011 Number and percent	40
2.4.	Services provided, by treatment type: 2011  Number and percent	44
2.5.	Facilities offering special programs or groups for specific client types, by facility operation: 2011  Number and percent	46
2.6.	Facilities offering special programs or groups for specific client types, by treatment type: 2011  Number and percent	47
2.7.	Facilities offering services in sign language for the hearing impaired and in languages other than English, by facility operation: 2011  Number and percent	48
2.8.	Facilities offering services in sign language for the hearing impaired and in languages other than English, by treatment type: 2011  Number and percent	49
2.9.	Facilities detoxifying clients, by type of substance used, routine use of medications during detoxification, and facility operation: 2011  Number and percent	50
2.10.	Facilities detoxifying clients, by type of substance used, routine use of medications during detoxification, and treatment type: 2011  Number and percent	
2.11.	Facility licensing, certification, or accreditation, by facility operation: 2011  Number and percent	52
2.12.	Facility licensing, certification, or accreditation, by treatment type: 2011  Number and percent	53

2.13.	Facilities employing specific practices as part of their standard operating procedures, by facility operation: 2011  Number and percent	54
2.14.	Facilities employing specific practices as part of their standard operating procedures, by treatment type: 2011  Number and percent	55
2.15.	Facility payment options and facilities receiving public funding, by facility operation: 2011  Number and percent	56
2.16.	Facility payment options and facilities receiving public funding, by treatment type: 2011  Number and percent	58
2.17.	Facility smoking policy, by facility operation: 2011  Number and percent	59
2.18.	Facility smoking policy, by treatment type: 2011 Number and percent	60
2.19a.	Clinical/therapeutic approaches, by frequency of use and facility operation: 2011 Number and column percent	61
2.19b.	Clinical/therapeutic approaches, by frequency of use and facility operation: 2011  Number and row percent distribution	64
2.20.	Clinical/therapeutic approaches, by frequency of use and treatment type: 2011 Number and percent	67
2.21.	Client outreach programs, by facility operation: 2011 Number and percent	69
2.22.	Client outreach programs, by treatment type: 2011 Number and percent	70
2.23.	Medication dispensed, by facility operation: 2011  Number and percent	71
2.24.	Medication dispensed, by treatment type: 2011  Number and percent	72
2.25.	Formal agreement for medical referral purposes and patient record management, by facility operation: 2011  Number and percent	
2.26.	Formal agreement for medical referral purposes and patient record management, by treatment type: 2011	
	Number and percent	74

2.27.	racility scheduling and plan or agreement with another provider to provide continuity of care, by facility operation: 2011  Number and percent	75
2.28.	Facility scheduling and plan or agreement with another provider to provide continuity of care, by treatment type: 2011  Number and percent	76
2.29.	Average scheduled hours for counseling, by day of week and facility operation: 2011  Number and hour	77
2.30.	Average scheduled hours for counseling, by treatment type and day of week: 2011  Number and hour	78
2.31.	Average scheduled hours for dispensing medication, by day of week and facility operation: 2011  Number and hour	79
2.32.	Average scheduled hours for dispensing medication, by treatment type and day of week: 2011  Number and hour	80
2.33.	Vaccinations, screenings for medical conditions, diagnostic tests, and routine drug testing, by facility operation: 2011  Number and percent	81
2.34.	Vaccinations, screenings for medical conditions, diagnostic tests, and routine drug testing, by treatment type: 2011  Number and percent	83
2.35.	Routine screenings for and treatment involving medication or counseling therapy for psychiatric conditions, by facility operation: 2011  Number and percent	84
2.36.	Routine screenings for and treatment involving medication or counseling therapy for psychiatric conditions, by treatment type: 2011  Number and percent	86
2.37.	Clinical staff employed and average hours worked in a week, by facility operation: 2011  Number and hour	87
2.38.	Clinical staff employed and average hours worked in a week, by treatment type: 2011  Number and hour	89
2.39.	Computer software use for clinical management, by facility operation: 2011  Number and percent	90

2.40.	Computer software use for clinical management, by treatment type: 2011  Number and percent	91
2.41.	Use of electronic resources, paper only, or a combination of both, by work activity and facility operation: 2011  Number and percent	92
2.42.	Use of electronic resources, paper only, or a combination of both, by work activity and treatment type: 2011  Number and percent	94
2.43.	Internet access, by facility operation: 2011 Number and percent	95
2.44.	Internet access, by treatment type: 2011 Number and percent	96
2.45.	Outpatient travel time and urban/rural location of facility, by facility operation: 2011  Number and percent	97
2.46.	Outpatient travel time and urban/rural location of facility, by treatment type: 2011 Number and percent	98
Chap	ter 3	
3.1.	Admissions to an OTP in 2010, by facility operation and treatment type: 2011  Number and percent	99
3.2.	All patients in treatment, by facility operation and treatment type: March 31, 2011  Number and percent	100
3.3.	Admissions to an OTP in 2010, by medication type and facility operation: 2011  Number and percent	101
3.4.	All patients in treatment, by medication type and facility operation: March 31, 2011  Number and percent	102
3.5.	Admissions to an OTP in 2010 and all patients in treatment on March 31, 2011, by medication type and treatment type: 2011  Number and percent	103
3.6.	Admissions to an OTP in 2010, by urban/rural location and facility operation: 2011  Number and percent	104
3.7.	All patients in treatment, by urban/rural location and facility operation: March 31, 2011  Number and percent.	105
	Prompor and DOLOGIL	

3.8.	Admissions to an OTP in 2010 and all patients in treatment on March 31, 2011, by urban/rural location and treatment type: 2011  Number and percent	106
3.9.	All patients in treatment, by gender, age at admission, race/ethnicity, veteran status, and facility operation: March 31, 2011  Number and percent	107
3.10.	All patients in treatment, by gender, age at admission, race/ethnicity, veteran status, and treatment type: March 31, 2011  Number and percent	109
3.11.	Patients in continuous treatment, by facility operation: March 31, 2011  Number and percent	110
3.12.	Patients in continuous treatment, by treatment type and medication: March 31, 2011  Number and percent	111
3.13.	Patients in OTP maintenance, by methadone and buprenorphine dosage levels:  March 31, 2011  Number and percent	112
3.14.	Patients in OTP maintenance, by methadone and buprenorphine dosage levels and facility operation: March 31, 2011  Number and percent	113
3.15.	Patients in OTP maintenance, by methadone and buprenorphine dosage levels and treatment type: March 31, 2011  Number and percent	115
3.16.	Patients receiving methadone and buprenorphine, by reason for medication and facility operation: March 31, 2011  Number and percent	116
3.17	Patients receiving methadone and buprenorphine, by treatment type and reason for medication: March 31, 2011  Number and percent	117
3.18.	Patients receiving methadone for 2 or more years, by take-home doses of methadone and facility operation: March 31, 2011  Number and percent	118
3.19.	Patients receiving methadone for 2 or more years, by take-home doses of methadone and treatment type: March 31, 2011  Number and percent.	119

## LIST OF FIGURES

Figure 1. OTP Facilities, by Treatment Type and Facility Operation: 2011	11
Figure 2. OTP Medication Types Dispensed, by Facility Operation: 2011	14
Figure 3. Facilities Offering Special Programs or Groups, by Facility Operation: 2011	17
Figure 4. Care for Health Conditions, by Facility Operation: 2011	19
Figure 5. Care for Psychiatric Conditions, by Facility Operation: 2011	21
Figure 6. Average Number of Clinical Staff, by Facility Operation: 2011	24
Figure 7. Average Number of Hours Worked, by Facility Operation: 2011	25
Figure 8. OTP Patients, by Treatment Type and Facility Operation: 2011	29
Figure 9. Patients Receiving Take-home Doses of Methadone, by Facility Operation: 2011	35
Figure 10. Survey Response Mode: 2011	148

## CHAPTER 1 DESCRIPTION OF THE 2011 OPIOID TREATMENT PROGRAM (OTP) SURVEY

A n Opioid Treatment Program (OTP) provides medication-assisted therapy to treat opioid use disorder. A facility must be certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) to be recognized as an OTP.<sup>1</sup> This report represents a census of all SAMHSA-certified OTPs in the United States, both public and private, and presents both highlights and tabular information from the 2011 Opioid Treatment Program (OTP) Survey.

The OTP survey was conducted between March and October 2011, with a reference date of March 31, 2011. Within SAMHSA, the Center for Behavioral Health Statistics and Quality (CBHSQ) in collaboration with the Center for Substance Abuse Treatment (CSAT) planned and developed the survey. CBHSQ was responsible for directing the survey. (A copy of the survey is provided in Appendix A, and additional information on survey methodology is provided in Appendix B.)

In order to reduce the burden on respondents and to optimize operational efficiency, the OTP survey was fielded in conjunction with SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS). N-SSATS is an annual census of all known facilities providing substance abuse treatment. It is designed to collect data on the location, characteristics, and use of alcohol and drug abuse treatment facilities and services throughout the 50 states, the District of Columbia, and other U.S. jurisdictions.<sup>2</sup> The facilities with OTPs are a subset of all facilities offering substance abuse treatment services. This report presents data from both the OTP survey and N-SSATS for each responding OTP.

#### **Medication-assisted Treatment (MAT)**

Various therapies are used in the treatment of substance abuse, including medication-assisted treatment (MAT).<sup>3,4</sup> Effective MAT combines the use of specialized medications as part of an overall treatment plan that also includes counseling and behavioral therapies. An important application of MAT is the use of methadone and buprenorphine in the treatment of addiction to opioids such as heroin, oxycodone, hydrocodone, and other prescription pain relievers that contain opiates.

SAMHSA certifies OTPs for up to three years; provisional programs with accreditation or compliance issues are certified for fewer than three years. A clinic that changes its location will not lose certification but must complete paperwork to ensure that SAMHSA is aware of and approves the move.

In 2011, OTPs were located in every state except North Dakota and Wyoming. The territories of Guam, the Federated States of Micronesia, and the Republic of Palau also did not have any OTPs. The District of Columbia and the territories of Puerto Rico and the Virgin Islands had OTPs.

<sup>&</sup>lt;sup>3</sup> Ball, J. C., & Ross, A. (1991). The effectiveness of methadone maintenance treatment: Patients, programs, services, and outcome. New York: Springer-Verlag.

McLellan, A. T., Arndt, I. O., Metzger, D. S., Woody, G. E., & O'Brien, C. P. (1993). The effects of psychosocial services in substance abuse treatment. *The Journal of American Medical Association*, 269(15), 1953–1959. doi: 10.1001/jama.1993.03500150065028

- Methadone is a synthetic opioid that blocks the effects of heroin and other opiates. Used successfully for more than 40 years, methadone has been shown to prevent withdrawal symptoms and relieve drug cravings.<sup>5,6</sup>
- Buprenorphine, which was approved for use in the treatment of opioid addition in 2002, also allows opioid-addicted individuals to discontinue the misuse of opioids without experiencing withdrawal symptoms.<sup>7</sup>

Currently, methadone and buprenorphine are the only two opioid agonists that are federally approved for the treatment of opioid addiction and dependence.

MAT with methadone can take place only in OTPs that have been certified through CSAT.<sup>8</sup> Treatment with buprenorphine may also take place in OTPs.<sup>9,10</sup> Additional background information on OTPs and their regulatory history is provided in Appendix C.

#### **Survey Objectives**

The objectives of the OTP survey were to collect multi-purpose data that can be used to:

- Assist SAMHSA and state and local governments in assessing the nature and extent of services provided in public and private OTPs and in forecasting OTP resource requirements;
- Analyze OTP services trends and conduct comparative analyses for the Nation, regions, and states; and
- Heighten awareness and provide up-to-date detailed information of the OTP system with respect to program organization, operating procedures, services, treatment, and staffing credentials, as well as provide characteristics of opioid-addicted patients.

U.S. Department of Health and Human Services, National Institutes of Health, National Institute on Drug Abuse. (2005). *Heroin: Abuse and addiction* (NIH Publication Number 05-4165). Retrieved from http://www.drugabuse.gov/sites/default/files/rrheroin.pdf

Joseph, H. (2003). Methadone maintenance treatment and clinical issues: The history of methadone maintenance. Retrieved from National Alliance of Methadone Advocates website: http://www.methadone.org/library/joseph 1994 methadone clinical.html

<sup>&</sup>lt;sup>7</sup> AHFS Consumer Medication Information, American Society of Health-System Pharmacist, Inc. (2012). *Buprenorphine sublingual*. Retrieved from http://www.nlm.nih.gov/medlineplus/druginfo/meds/a605002.html

<sup>8</sup> SAMHSA/CSAT rules define the term Opioid Treatment Program and SAMHSA/CSAT is the only entity that can certify OTPs. A facility must have SAMHSA certification to be recognized as an OTP and to dispense methadone and buprenorphine.

Physicians with specialized training may prescribe buprenorphine at other (non-OTP) substance abuse treatment facilities as well as in their own office-based practices.

<sup>&</sup>lt;sup>10</sup> The Drug Addiction Treatment Act of 2000 provides waiver authority for physicians who dispense or prescribe certain narcotic drugs (Schedule III, IV, and V) for opioid maintenance treatment or detoxification treatment. The text of the act is available at http://buprenorphine.samhsa.gov/fulllaw.html.

#### **Data Collection Procedures for the 2011 OTP Survey**

Field Period and Reference Date

The survey reference date for the 2011 OTP survey was March 31, 2011. The field period was from March 31 through October 24, 2011.

Survey Universe

The 2011 OTP survey universe consisted of 1,371 facilities (Table 1.1) in SAMHSA's Inventory of Substance Abuse Treatment Services (I-SATS)<sup>11</sup> that were identified as OTPs.

#### Content

The 2011 OTP survey instrument was a seven-page document with 30 numbered questions (Appendix A). It contained two main sections that collected information about the following topics:

- OTP services and characteristics
  - Scheduled operation and continuity of care agreements
  - Agreements for medical referral purposes
  - Agreements for patient record management
  - Scheduled hours for dispensing medication and counseling
  - Medical services (vaccinations and screenings and diagnostic tests for medical conditions)
  - Routine drug testing
  - Screening and treatment (medication and counseling) for psychiatric conditions
  - Clinical staff (number of types employed and hours worked)
  - Records management (computer/electronic, paper, both) and general type of software used
  - Internet capability
  - Outpatient travel time
- OTP patient characteristics
  - Number of admissions in the previous year
  - Number of patients in treatment on March 31, 2011 (the survey reference date)
  - Patients' demographic characteristics (gender, age, race/ethnicity, veteran status)
  - Length of time in treatment
  - Patient numbers for type of medication (methadone, buprenorphine)
  - Purpose of medication (detoxification, maintenance)
  - Doses of medication for maintenance patients
  - Take-home doses of methadone for patients in treatment 2 or more years

The Inventory of Substance Abuse Treatment Services (I-SATS), recently renamed the Inventory of Behavioral Health Services (I-BHS), is a continuously updated, comprehensive listing of all known substance abuse and mental health treatment services, both public and private.

Additionally, pertinent topics from the 2011 N-SSATS were included (see the 2011 N-SSATS Report<sup>12</sup> for further details):

- Facility operating entity
- Type of care provided (outpatient treatment services, residential [non-hospital] treatment services, hospital treatment services)
- Services offered (assessment and pretreatment services, counseling, pharmacotherapies, testing, transitional services, ancillary services)
- If an OTP, are all clients in the facility in the OTP
- Clinical/therapeutic approaches
- Special programs or groups provided for specific client types
- Provision of services in sign language and/or in languages other than English
- Detoxification from alcohol, benzodiazepines, opiates, cocaine, methamphetamines, or other drugs, and routine use of medication during detoxification
- Client outreach (outreach to persons in the community who may need treatment, provision of a facility Web site)
- Licensure, certification, or accreditation agencies or organizations
- Standard operating procedures
- Payment options accepted, including use of a sliding fee scale and/or treatment at no charge
- Facility's receipt of government funding
- Facility's smoking policy

#### Data Collection

The survey used three data collection modes: a secure web-based questionnaire, a paper questionnaire sent by mail, and a telephone interview. Most respondents (82 percent) completed the survey on the Web, followed by 8 percent through the mail and 10 percent on the telephone [Table 1.1]. For additional information on data collection and quality assurance procedures, see Appendix B.

#### Facility Status and Response Rate

*Table 1.1* presents a summary of response rate information. SAMHSA's I-SATS was used to identify 1,371 OTPs, and these facilities formed the initial OTP survey universe. Of these 1,371 facilities, 234 provided information but were deemed out of the scope of this report.

• One hundred and thirty-nine facilities (10 percent) were found to be ineligible for both N-SSATS and the OTP survey because, at the time of the survey, they did not provide substance abuse treatment or because they provided treatment for incarcerated persons only (i.e., in jails or prisons).

Substance Abuse and Mental Health Services Administration, National Survey of Substance Abuse Treatment Services (N-SSATS): 2011. Data on Substance Abuse Treatment Facilities. BHSIS Series S-64, HHS Publication No. (SMA) 12-4730. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

■ Ninety-five facilities were excluded because it was determined that they were never SAM-HSA-certified OTPs.

Table 1.1. OTP facilities, by status and mode of response: 2011

Facilities	Number	Percent
Total facilities in survey	1,371	100.0
Closed/ineligble	139	10.1
Never an OTP	95	6.9
Eligible	1,137	82.0
Total eligible	1,137	100.0
Non-repondents	56	4.9
Respondents	1,081	95.1
Included in report	1,081	95.1
Mode of response	1,081	100.0
Web	890	82.3
Telephone	109	10.1
Mail	82	7.6

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey.

#### **Data Considerations and Limitations**

As with any data collection effort, certain procedural considerations and data limitations must be taken into account when interpreting data from the 2011 OTP survey. Some general issues are listed below. Considerations and limitations of specific data items are discussed where the data are presented.

- The OTP survey attempted to obtain responses from all known OTP facilities, but it was a voluntary survey. There was no adjustment for the 5 percent facility non-response.
- The OTP survey was a point-prevalence survey. It provides information on the OTP system and its clients on the reference date. The client counts presented in this report do not represent annual totals. Rather, OTP survey data provide a "snapshot" of OTPs and clients on an average day.
- Multiple responses were allowed for certain variables (e.g., medical and psychiatric screening, testing, or treating; medical agreements). Tabulations of these variables include the total number of facilities reporting each response.
- Data from the OTP survey are linked to the same facility's N-SSATS data. Not all facilities with OTPs treat only OTP clients; therefore, some data obtained from N-SSATS may not pertain directly to the OTP component.

- The number of detoxification-only facilities (63) is relatively small compared with the number of maintenance-only (354) and both maintenance and detoxification facilities (664), and therefore comparisons should be made with caution.
- Values in charts, narrative lists, and percentage distributions are calculated using actual raw numbers and rounded for presentation in this report; calculations using rounded values may produce different results.

#### Organization of the Report

The balance of this report is organized into the following chapters:

- Chapter 2 describes key characteristics of facilities, the services they provided, and their staffing in 2011, based on OTP facility operation and treatment type.
- Chapter 3 describes key characteristics of patients in opioid treatment programs on March 31, 2011 and admissions in 2010, based on facility operation and treatment type.
- Appendix A contains the 2011 OTP and N-SSATS mail survey questionnaires.
- Appendix B presents 2011 OTP survey methodology, including data collection and quality assurance procedures.
- Appendix C contains a timeline of the history and development of medication-assisted opioid therapy.
- Appendix D contains information on item response rates.
- Appendix E contains relevant information on what an OTP is.

#### **Terminology**

The tables in the report are organized by OTP treatment type and facility operation. Therefore, it is important to define these terms. It is also important to note that the services described in this report are only those services provided at the OTP location regardless of operation type.

The treatment type<sup>13</sup> of OTP facilities certified by SAMHSA to use opioid agonist therapy including methadone and buprenorphine in the treatment of opioid use disorders includes:

- Maintenance only
- Detoxification only
- Both maintenance and detoxification

Facility operation<sup>14</sup> indicates the type of entity responsible for the operation of the facility. The 1,081 eligible respondents to the 2011 OTP survey are categorized into three mutually exclusive categories: (1) Department of Veterans Affairs (VA) operated facilities; (2) outpatient-only facilities excluding Department of Veterans Affairs (VA) operated facilities; and (3) other facilities excluding facilities in (1) and (2). Facilities offering strictly outpatient services were categorized as outpatient-only facilities. Other facilities could offer hospital inpatient, residential or outpatient services. While

<sup>&</sup>lt;sup>13</sup> Treatment type was determined through questions asked in the 2011 N-SSATS.

<sup>&</sup>lt;sup>14</sup> Facility operation was determined through responses to a question asked in the 2011 N-SSATS.

some other facilities offered outpatient services, none of them were outpatient only. VA facilities could provide a mixture of outpatient-only and other hospital inpatient or residential care.

Facilities in this report were also classified by four facility operation types:

- Private for-profit
- Private non-profit
- Government other than VA
  - Local, county, or community government
  - State
  - Tribal
- Department of Veterans Affairs

## CHAPTER 2 OTP Services and Characteristics

This chapter presents national-level information on the characteristics of the facilities that responded to the 2011 Opioid Treatment Program (OTP) Survey. The OTP survey was sent to all substance abuse treatment facilities known to operate an OTP in the United States and its territories, as identified in their response to the 2010 National Survey of Substance Abuse Treatment Services (N-SSATS). <sup>15,16</sup> The total number of eligible OTPs responding to the OTP survey was 1,081.

Facilities with OTPs in the 2011 N-SSATS were asked which of three types of treatment services—maintenance services, detoxification services, or both maintenance and detoxification services—the OTP at their location provided. This information was used to classify the 1,081 eligible respondents to the 2011 OTP survey into three mutually exclusive treatment services categories:

- OTPs that provided maintenance—only services—(354 OTPs, or 33 percent of all OTPs);
- OTPs that provided detoxification-only services—(63 OTPs, or 6 percent of all OTPs); and
- OTPs that provided both maintenance and detoxification services—(664 OTPs, or 61 percent of all OTPs).

Facilities in the 2011 N-SSATS were asked which of three major types of care—outpatient, residential (nonhospital), and hospital inpatient—they offered. While OTPs can be associated with any type of care, most are associated with outpatient care.

Facilities were also asked if they were operated by a private for-profit organization, a private non-profit organization, or a government entity—state; local, county, or community; tribal; or federal. All facilities with OTPs that were operated by the federal government were under the Department of Veterans Affairs.

The type of care and facility operation information was used for the purposes of this report to classify the 1,081 eligible respondents to the 2011 OTP survey into three mutually exclusive categories:

- All OTPs operated by the Department of Veterans Affairs—(34 OTPs, or 3 percent of all OTPs);
- OTPs that provided outpatient-only care—(932 OTPs, or 86 percent of all OTPs); and

N-SSATS is an annual census of facilities providing substance abuse treatment, conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA). N-SSATS is designed to collect data on the location, characteristics, and use of alcohol and drug abuse treatment facilities and services throughout the 50 states, the District of Columbia, the territory of Guam, the Federated States of Micronesia, the Republic of Palau, the Commonwealth of Puerto Rico, and the Virgin Islands of the United States.

Some of the information in this chapter comes from data provided by the facility when it responded to N-SSATS (e.g., facility payment options). When that is the case, the term "facility with OTP" will be used because it is possible that the information provided for the facility as a whole might not apply to the OTP.

■ OTPs that were neither operated by the VA nor outpatient only—(115 OTPs, or 11 percent of all OTPs).

#### **Facility Operation and Treatment Type**

Table 2.1 and Figure 1. The total number of eligible OTPs responding to the OTP survey was 1,081. Among them, the majority were outpatient-only OTPs operated by private for-profit organizations (53 percent), followed by private non-profit organizations (29 percent) and government operated facilities (5 percent). The proportion of responding other OTPs was significantly less for private for-profit (3 percent), private non-profit (6 percent), and government (1 percent). OTPs operated by the Department of Veterans Affairs accounted for 3 percent of the responding OTPs.

- The majority of facilities (664 facilities, or 61 percent) responding to the OTP survey provided both maintenance and detoxification services.
  - 71 percent of the outpatient-only OTPs operated by private for-profit organizations provided both maintenance and detoxification services, followed by 55 percent of the outpatient-only OTPs operated by private non-profit organizations and 51 percent of the outpatient-only OTPs operated by a (non-VA) government entity.
  - 64 percent of other OTPs operated by government operated facilities provided both maintenance and detoxification services, followed by other OTPs operated by private for-profit organizations (45 percent) and private non-profit organizations (29 percent).
  - 65 percent of OTPs operated by the Department of Veterans Affairs provided both maintenance and detoxification services.
- One third of the facilities with OTPs (33 percent) provided maintenance-only services.
  - 49 percent of the outpatient-only OTPs operated by government operated facilities provided maintenance-only services, followed by outpatient-only OTPs operated by private non-profit organizations (45 percent) and outpatient-only OTPs operated by private for-profit organizations (29 percent).
  - 14 percent of other OTPs operated by private non-profit organizations provided maintenance-only treatment, followed by other OTPs operated by private for-profit organizations (10 percent) and by government operated facilities (7 percent).
- Only 63 facilities with OTPs (6 percent of all facilities with OTPs) provided detoxificationonly service.
  - 57 percent of other OTPs operated by private non-profit organizations provided detoxification-only services, followed by other OTPs operated by private for-profit organizations (45 percent) and government operated facilities (29 percent).
  - Few of the Department of Veteran Affairs operated facilities provided detoxificationonly services (3 percent).

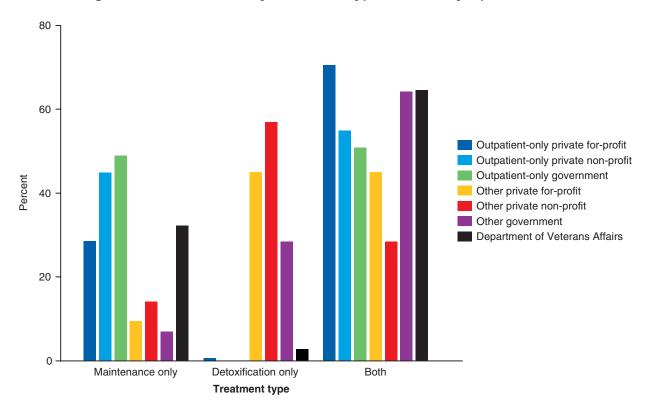


Figure 1. OTP Facilities, by Treatment Type and Facility Operation: 2011

#### Type of Care Offered and Treatment Type

*Table 2.2.* The three broad types of care—outpatient, residential (non-hospital), and hospital inpatient—each have several subcategories.

- Outpatient treatment: regular outpatient care, intensive outpatient treatment, outpatient day treatment/partial hospitalization, outpatient detoxification, and outpatient methadone maintenance
- Residential (non-hospital) treatment: long-term treatment (more than 30 days), short-term treatment (30 days or fewer), and detoxification
- Hospital inpatient treatment: detoxification, and treatment

Outpatient treatment was the most widely available type of care, offered by 94 percent of all OTPs on March 31, 2011. The proportion of OTPs offering outpatient care ranged from 44 percent of detoxification-only OTPs to 98 percent of maintenance-only OTPs.

- Among the subcategories of outpatient treatment, outpatient methadone maintenance was offered by 90 percent of OTPs, followed by regular outpatient treatment (65 percent), and outpatient detoxification (51 percent).
- Hospital inpatient treatment was offered by 8 percent of all OTPs. OTPs offering detoxification-only services made up the bulk of inpatient treatment services at 71 percent.

■ About 71 percent of OTPs had all clients admitted to their opioid treatment program. The proportion was similar for OTPs offering either maintenance-only or both maintenance and detoxification services (75 percent each). However, only 10 percent of detoxification-only OTPs had all of their clients admitted to their opioid treatment program.

#### **Pharmacotherapies Provided**

Tables 2.3 and 2.4. Almost all OTPs offered at least one pharmacotherapy. Overall, OTPs provided patients with pharmacotherapies such as methadone (98 percent), buprenorphine (51 percent), medications for psychiatric disorders (31 percent), nicotine replacement (21 percent), oral Naltrexone (19 percent), Antabuse (19 percent), Campral (16 percent), smoking cessation medications (16 percent), and Vivitrol® (injectable Naltrexone) (10 percent).

#### *Type of care/Facility operation*

- Outpatient-only private non-profit OTPs were more likely to provide methadone treatment (97 percent) than other private non-profit OTPs (87 percent).
- In general, outpatient-only OTPs were less likely to provide pharmacotherapies (except methadone) than other OTPs, regardless of facility operation type. While only 6 percent of outpatient-only OTPs operated by private for-profit organizations provided medications for psychiatric disorders, all other OTPs operated by private for-profit organizations did so.
- All OTPs operated by the Department of Veterans Affairs provided methadone and medications for psychiatric disorders.

#### *Treatment type*

- OTPs offering maintenance-only (96 percent) or both maintenance and detoxification (more than 99 percent) services were more likely to provide methadone treatment than OTPs offering detoxification-only services (89 percent).
- Larger proportions of OTPs offering detoxification-only services provided pharmacotherapies (except methadone) than OTPs offering maintenance-only or both maintenance and detoxification services: 89 percent of detoxification-only OTPs provided medications for psychiatric disorders, while only 26 to 30 percent of OTPs offering maintenance-only or both maintenance and detoxification services did the same.

#### **OTP Medications**

Tables 2.23, 2.24 and Figure 2. Currently, methadone and buprenorphine are the only opioid medications approved for the treatment of opioid addiction. OTPs were asked if they dispensed methadone or buprenorphine in 2011. In general, 68 percent of OTPs dispensed methadone only, 28 percent dispensed both methadone and buprenorphine, and 3 percent dispensed/prescribed buprenorphine only.

#### *Type of care/Facility operation*

• Outpatient-only OTPs operated by private non-profit and private for-profit organizations were much more likely to dispense methadone only (78 percent and 69 percent, respectively)

- than other OTPs operated by private non-profit or private for-profit organizations (46 percent and 39 percent, respectively).
- Outpatient-only OTPs operated by government operated facilities, private for-profit, and private non-profit organizations were less likely to dispense/prescribe buprenorphine only (6 percent, less than 1 percent, and 1 percent, respectively) than other OTPs operated by government operated facilities, private for-profit, and private non-profit organizations (21 percent, 23 percent, and 19 percent, respectively).
- None of the OTPs operated by the Department of Veterans Affairs reported dispensing/prescribing buprenorphine only. The majority of their OTPs (59 percent) dispensed both buprenorphine and methadone.
- Of the 738 OTPs dispensing methadone only, most were outpatient-only OTPs operated by either private for-profit organizations (53 percent) or private non-profit organizations (33 percent). Among the 305 OTPs dispensing both methadone and buprenorphine, 57 percent were outpatient-only OTPs operated by private for-profit organizations, followed by those operated by private non-profit organizations (21 percent).
- Of the 29 facilities dispensing/prescribing buprenorphine only, 45 percent were other OTPs operated by private non-profit organizations.

- The majority of OTPs offering maintenance-only or both maintenance and detoxification services dispensed methadone only (79 percent and 65 percent, respectively).
- OTPs that dispensed both methadone and buprenorphine or methadone only were more likely to provide both maintenance and detoxification services (74 percent and 58 percent, respectively) than those that dispensed/prescribed buprenorphine only (21 percent). On the other hand, OTPs that dispensed/prescribed buprenorphine only were more likely to provide detoxification-only services (52 percent) than those that dispensed both methadone and buprenorphine or methadone only (5 percent and 4 percent, respectively).

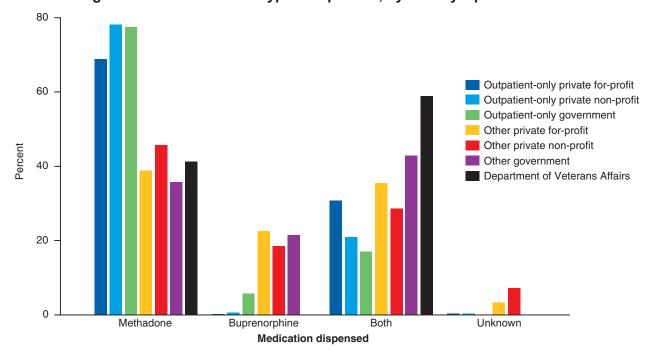


Figure 2. OTP Medication Types Dispensed, by Facility Operation: 2011

#### **Formal Agreements for Medical Referrals**

OTPs were asked if they had any formal agreements for medical referral purposes with a Federally Qualified Health Center (FQHC), hospital, medical clinic, or another provider on March 31, 2011.

*Tables 2.25 and 2.26.* About 58 percent of OTPs had formal agreements with other organizations for medical referral purposes. More specifically, 47 percent of OTPs had an agreement with a hospital, and 28 percent had an agreement with a medical clinic.

#### *Type of care/Facility operation*

- Outpatient-only OTPs, regardless of facility operation type, were more likely to have a formal agreement than other OTPs.
- Between 71 and 81 percent of other OTPs had formal agreements with a hospital.
- Seventy-four percent of Department of Veterans Affairs operated OTPs had formal agreements for medical referral purposes, including 56 percent that had formal agreements with a hospital.

- OTPs offering both maintenance and detoxification services were most likely to have formal agreements with other organizations for medical referral purposes (62 percent), while the detoxification-only OTPs were least likely to have any formal agreements (8 percent).
- Detoxification-only OTPs had the highest proportion of facilities with any formal agreements with other organizations for medical referral purposes (83 percent), followed by OTPs

offering both maintenance and detoxification services (58 percent) and maintenance-only services (53 percent).

• Out of 63 detoxification-only OTPs, 79 percent had formal agreements with a hospital.

#### **Facility Payment Options**

Tables 2.15 and 2.16. N-SSATS asked facilities if they used a sliding fee scale, whether they offered treatment at no charge to clients who could not afford to pay, and what kind of payment options they had.

Almost all OTPs accepted cash or self-payment. Sixty-five percent of OTPs accepted Medicaid, 49 percent accepted private health insurance, 32 percent accepted state financed health insurance, 27 percent accepted Medicare, 19 percent accepted federal military insurance, and less than 2 percent of all OTPs accepted Indian Health Service (IHS)/638 contract care funds.

About 47 percent of OTPs accepted a sliding fee scale payment. Forty-five percent of OTPs received public funds for substance abuse treatment programs. About 30 percent of OTPs offered treatment at no charge for patients who could not pay.

#### Type of care/Facility operation

- The Department of Veterans Affairs OTPs were more likely to accept private health insurance (91 percent) and less likely to accept Medicaid (35 percent) than outpatient-only OTPs, regardless of facility operation type.
- Regardless of facility operation types, outpatient-only OTPs were less likely than other OTPs to accept private health insurance, Medicare, state financed health insurance, and federal military insurance.
- Outpatient-only OTPs operated by private non-profit organizations were more likely to accept a sliding fee scale payment than other OTPs operated by private non-profit organizations (83 percent, and 59 percent, respectively).
- Regardless of facility operation types, outpatient-only OTPs were less likely than other OTPs to offer treatment at no charge for clients who could not pay.
- Outpatient-only OTPs operated by private non-profit organizations (77 percent) and government operated facilities (91 percent) were more likely to receive public funds for substance abuse treatment programs than other OTPs operated by private non-profit organizations (51 percent) and government operated facilities (79 percent).

- Private health insurance was accepted by 49 percent of all OTPs, ranging from 44 percent of maintenance-only OTPs to 89 percent of detoxification-only OTPs.
- State-financed health insurance was accepted by 32 percent of all OTPs, but the proportion varied by treatment service: 30 percent for OTPs offering both maintenance and detoxification services, 31 percent for maintenance-only OTPs, and 57 percent for detoxification-only OTPs.

■ OTPs providing detoxification-only services were more likely to accept a sliding fee scale payment (59 percent) or treat clients at no charge (51 percent) compared with OTPs providing maintenance-only (46 percent and 32 percent, respectively) or both maintenance and detoxification (46 percent and 27 percent, respectively) services.

#### **Programs or Groups for Specific Client Types**

*Tables 2.5, 2.6, and Figure 3.* Seventy-three percent of OTPs offered special programs or groups for one or more client types. Overall, OTPs were most likely to offer special programs or groups for adult women (44 percent), pregnant or postpartum women (42 percent), and clients with co-occurring disorders (31 percent).

#### Type of care/Facility operation

- Compared with all other facility operation types, other OTPs operated by a government entity were more likely to offer programs for clients with co-occurring disorders (71 percent), adult men (57 percent), persons with HIV or AIDS (36 percent), and criminal justice clients (29 percent), while outpatient-only government OTPs were more likely to offer special programs for adult women (74 percent) and pregnant or postpartum women (55 percent).
- Outpatient-only OTPs operated by private for-profit organizations were less likely than other OTPs operated by private for-profit organizations to offer special programs for clients with co-occurring disorders (20 percent vs. 45 percent), adult women (36 percent vs. 58 percent), adult men (22 percent vs. 48 percent), and adolescents (2 percent vs. 19 percent).

- The facilities with OTPs that provided both maintenance and detoxification services were more likely than those providing maintenance-only services to offer special programs or groups to pregnant or postpartum women (48 percent vs. 34 percent).
- OTPs offering detoxification-only services were more likely than OTPs of other treatment types to offer special programs or groups for clients with co-occurring disorders (54 percent vs. 31 percent or less) or adolescents (16 percent vs. 5 percent or less).

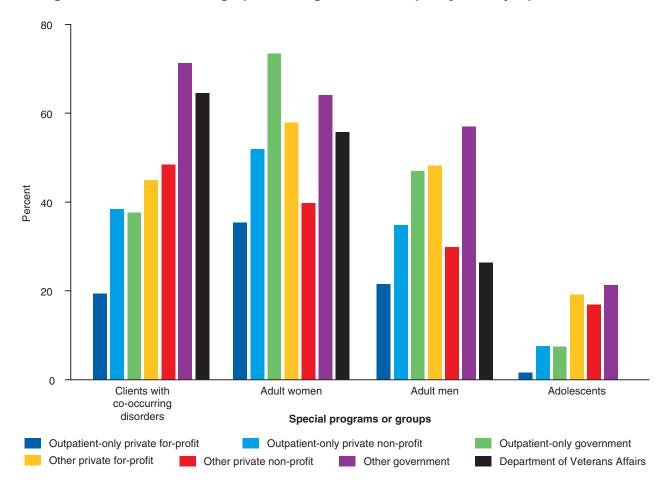


Figure 3. Facilities Offering Special Programs or Groups, by Facility Operation: 2011

#### **Screening and Diagnostic Services**

The OTP survey covered care for several health conditions, asking whether the OTP:

- provided vaccinations for hepatitis B or influenza;
- routinely screened for or performed diagnostic tests for diabetes, hepatitis C, HIV/AIDS, hypertension, pregnancy, heartbeat abnormalities, sexually transmitted infections, sleep apnea, alcohol use, and tobacco use; or
- routinely tested for the following drugs at admission: marijuana, cocaine, benzodiazepines, heroin, prescription opioids, methamphetamines, and other stimulants.

Tables 2.33, 2.34, and Figure 4. About 41 percent of OTPs provided vaccinations either for hepatitis B or for influenza. The most commonly screened-for health conditions were pregnancy, alcohol use, sexually transmitted infections (STIs), and hypertension (91 percent, 89 percent, 82 percent, and 81 percent, respectively). The health condition least routinely screened for was sleep apnea (16 percent). The proportion of facilities that routinely screened for the remaining health

conditions—diabetes, HIV/AIDS, heartbeat abnormalities, hepatitis C, and tobacco use—ranged from 47 percent to 74 percent.

The proportion of OTPs performing diagnostic tests for specific health conditions closely mirrored the proportions that routinely screened for those conditions, but at slightly lower rates. Diagnostic tests were most frequently performed for pregnancy, alcohol use, STIs, and hypertension (71 percent, 68 percent, 57 percent, and 48 percent, respectively). The health conditions for which diagnostic tests were least frequently performed were tobacco use (15 percent) and sleep apnea (3 percent). The proportions for the remaining conditions ranged from 27 percent for diabetes tests to 41 percent for HIV/AIDS tests.

#### Type of care/Facility operation

- Compared with other OTPs operated by private for-profit or private non-profit organizations, a greater number of outpatient-only OTPs operated by these organizations provided the whole range of medical screenings, diagnostic tests for medical conditions, and vaccinations.
- Nearly all OTPs offered screening for at least one medical condition. More than 86 percent of all OTPs provided diagnostic tests for at least one medical condition.
- Outpatient-only OTPs operated by private for-profit organizations were less likely than other OTPs operated by private for-profit organizations to provide screening for pregnancy (93 percent vs. 100 percent), for alcohol use (85 percent vs. 100 percent), for hypertension (74 percent vs. 100 percent), and for sexually transmitted infection (STIs) (80 percent vs. 94 percent).
- Outpatient-only OTPs operated by private non-profit organizations were more likely than outpatient-only OTPs operated by private for-profit organizations to provide diagnostic tests for diabetes (30 percent vs. 15 percent), hepatitis C (46 percent vs. 27 percent), HIV/AIDS (55 percent vs. 25 percent), and alcohol use (73 percent vs. 60 percent).
- All OTPs operated by the Department of Veterans Affairs performed screenings for hepatitis C, hypertension, alcohol use, and tobacco use. They were more likely to conduct diagnostic tests for sleep apnea (38 percent) than either outpatient-only (3 percent or less) or other OTPs (21 percent or less).

- On average, more than 60 percent of OTPs that had both maintenance and detoxification services provided routine screenings and diagnostic tests, followed by 33 percent of maintenance-only OTPs providing those same services. Only about 6 percent of detoxification-only OTPs offered routine screenings or diagnostic tests.
- OTPs providing detoxification-only services were more likely than OTPs providing maintenance-only or both maintenance and detoxification services to offer screening for all specific medical conditions. For example, 97 percent of OTPs providing detoxification-only services offered screening for alcohol use compared with 89 percent of OTPs providing both maintenance and detoxification services and 88 percent of OTPs providing maintenance-only services.

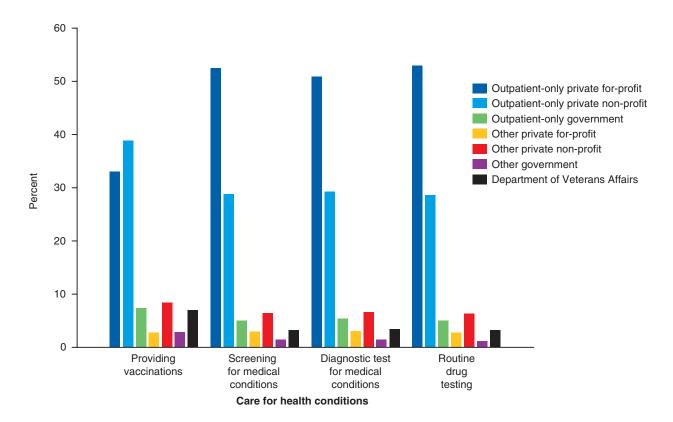


Figure 4. Care for Health Conditions, by Facility Operation: 2011

#### **Care for Psychiatric Conditions**

*Tables 2.35, 2.36 and Figure 5.* More than three quarters of OTPs routinely screened for depression (78 percent), followed by screening services for anxiety/panic disorder (72 percent), post traumatic stress disorder (PTSD) (66 percent), bipolar disorder (65 percent), and schizophrenia (60 percent). About 55 percent of OTPs provided treatment through counseling therapy for anxiety/panic disorder and depression. About 35 percent of OTPs provided treatment through medication for anxiety/panic disorder and depression.

#### *Type of care/Facility operation*

- In general, there were a larger number of outpatient-only OTPs operated by private for-profit or private non-profit organizations routinely screening for or treating psychiatric conditions than those of other facility operation types.
- Outpatient-only OTPs operated by private non-profit organizations were more likely than outpatient-only OTPs operated by private for-profit organizations to routinely screen for at least one psychiatric condition (87 percent vs. 72 percent), or to treat at least one with medication (55 percent vs. 14 percent), or to treat at least one through counseling therapy (71 percent vs. 49 percent).

- Outpatient-only OTPs operated by private for-profit organizations were less likely than other OTPs operated by private for-profit organizations to treat psychiatric conditions with medication for anxiety/panic disorder (10 percent vs. 90 percent), PTSD (7 percent vs. 71 percent), bipolar disorder (5 percent vs. 84 percent), and schizophrenia (5 percent vs. 77 percent).
- All OTPs operated by the Department of Veterans Affairs performed screening tests for depression and PTSD, and provided treatment with medication for anxiety/panic disorder and depression.

- OTPs providing both maintenance and detoxification were more likely to routinely screen for all psychiatric conditions (61 percent) than those providing maintenance only (32 percent) or detoxification only (6 percent).
- Routine screening for at least one psychiatric condition was done by 89 percent of OTPs providing detoxification only, 80 percent of OTPs providing both maintenance and detoxification, and 79 percent of OTPs providing maintenance only. All types of OTPs were most likely to screen for depression and least likely to screen for "other psychiatric conditions" (i.e., conditions other than anxiety/panic disorder, bipolar disorder, depression, PTSD, or schizophrenia).
- Treatment for psychiatric conditions was more likely to involve counseling than medications in OTPs providing both maintenance and detoxification. However, in OTPs providing detoxification only, treatment was more likely to involve medication than counseling.

50 Outpatient-only private for-profit Outpatient-only private non-profit Outpatient-only government 40 Other private for-profit Other private non-profit Other government Department of Veterans Affairs Percent 30 20 10 0 Treatment involving Routine screenings Treatment involving medication counseling Care for psychiatric condition

Figure 5. Care for Psychiatric Conditions, by Facility Operation: 2011

#### **OTP Service Hours**

*Tables 2.29, 2.30, 2.31, and 2.32.* Nearly all (97 to 98 percent) OTPs provided counseling throughout the work week. About 53 percent of OTPs provided counseling service on Saturday, and 22 percent did so on Sunday. The average number of hours scheduled for providing counseling was more than 8 hours on weekdays, 5 hours on Saturdays, and 7 hours on Sundays.

Almost all (98 to 99 percent) OTPs maintained hours for dispensing medication on weekdays. Ninety-six percent of OTPs had hours for dispensing medication on Saturdays and 54 percent did so on Sundays. The average number of hours scheduled for dispensing medication was about 7 hours on weekdays, more than 4 hours on Saturdays, and 5 hours on Sundays.

#### *Type of care/Facility operation*

Outpatient-only OTPs, on average, provided fewer counseling hours per day than other OTPs. For outpatient-only OTPs, the average number of hours scheduled to provide counseling per weekday was 8 hours for those operated by private non-profit organizations or government operated facilities and more than 7 hours for those operated by private for-profit organizations. For other OTPs, the average number of hours scheduled to provide counseling per weekday was 13 hours for those operated by private for-profit organizations, 11 hours for those operated by government operated facilities, and 10 hours for those operated by private non-profit organizations.

Outpatient-only OTPs on average provided fewer medication dispensing hours than other OTPs. All outpatient-only OTPs scheduled an average of 6 hours per day to dispense medications. The average number of hours per weekday scheduled to dispense medications was 16 hours for other OTPs operated by private for-profit organizations, 14 hours for other OTPs operated by government operated facilities, and 13 to 14 hours for other OTPs operated by private non-profit organizations.

#### Treatment type

- The average number of hours scheduled to provide counseling for OTPs providing maintenance only or both maintenance and detoxification was between 7 and 8 hours on weekdays, 4 hours on Saturday, and 5 hour on Sunday. For OTPs offering detoxification only, the average number of hours scheduled to provide counseling was 12 hours every day of the week.
- The average number of hours scheduled to dispense medications for OTPs providing maintenance only or both maintenance and detoxification was similar (6 hours on weekdays, and 4 hours on both Saturday and Sunday). OTPs providing detoxification only scheduled on average more than 16 hours per day to dispense medications.

#### **OTP Clinical Staff Capacity**

Tables 2.37, 2.38, and Figure 6. Overall, the average number of clinical staff employed at each OTP included 2 physicians, 1 part-time pharmacist, 2 registered nurses, 3 licensed practical nurses, 3 counselors with masters degrees, 3 counselors with bachelor degrees, 2 counselors with associate degrees or no degrees, and 1 mid-level medical personnel (nurse practitioner, PA, APRN, etc.). Counselors worked on average about 30 hours per week; practical nurses worked on average 27 hours per week; registered nurses, 25 hours; psychologists, 24 hours; mid-level medical personnel, 21 hours; physicians, 14 hours; and pharmacists, 11 hours per week.

#### Type of care/Facility operation

- Regardless of facility operation type, outpatient-only OTPs or Department of Veterans Affairs operated OTPs employed fewer employees than other OTPs.
- Clinical staff at outpatient-only OTPs operated by private for-profit organizations worked fewer hours than those at other OTPs operated by private for-profit organizations. While the pharmacists and psychologists at outpatient-only OTPs operated by private for-profit organizations worked 6 and 21 hours per week, respectively, those at other OTPs operated by private for-profit organizations worked on average 25 and 38 hours per week, respectively.

- OTPs providing detoxification only employed a larger average number of clinical staff than OTPs providing either maintenance only or both maintenance and detoxification.
- Pharmacists and physicians at OTPs providing detoxification only worked a longer average number of hours per week (26 and 21 hours per week, respectively) than those at OTPs providing maintenance only (11 and 14 hours per week, respectively) or both maintenance and detoxification (9 and 13 hours per week, respectively).

#### **OTP Outpatient Travel Time**

Tables 2.45 and 2.46. OTPs were asked if any outpatients travelled an hour or more, each way, to be treated in their program. Of 1,081 OTPs, 635 (59 percent) reported outpatient travel of an hour or more. The largest proportion of the 635 OTPs were located in a large central metro (23 percent), followed by medium metro (14 percent) and large fringe metro (10 percent). About 12 percent were in small metro or rural areas.

#### *Type of care/Facility operation*

- Of 635 OTPs reporting outpatient travel of an hour or more each way for treatment, 92 percent were outpatient-only OTPs. The largest proportions of these outpatient-only OTPs were from OTPs operated by private for-profit organizations (67 percent), followed by 62 percent of OTPs operated by a government entity, and 55 percent of OTPs operated by a private for-profit organization.
- Among 1,081 OTPs, 23 percent reporting outpatient travel of an hour or more each way for treatment were located in large central metros: 30 percent were operated by private non-profit organizations, 20 percent were operated by a private for-profit organization, and 19 percent were operated by a government entity.
- Seventy-nine percent of OTPs operated by the Department of Veterans Affairs reported outpatients traveling an hour or more each way for treatment. About 74 percent of VA OTPs were located in a large central metro area and the rest were in a large fringe metro area.

- Of 635 OTPs that reported outpatient travel of an hour or more each way for treatment, 62 percent were OTPs providing both maintenance and detoxification, 36 percent were OTPs providing maintenance only, and 2 percent were OTPs providing offering detoxification only.
- The maintenance-only and both maintenance and detoxification OTPs reporting outpatients with these long travel times had similar distributions: approximately 23-26 percent were in large central metros, 15 percent were in medium metros, and about 10 percent were in large fringe metros.
- No detoxification-only OTPs that were located in small metro or noncore areas reported outpatient travel of an hour or more.

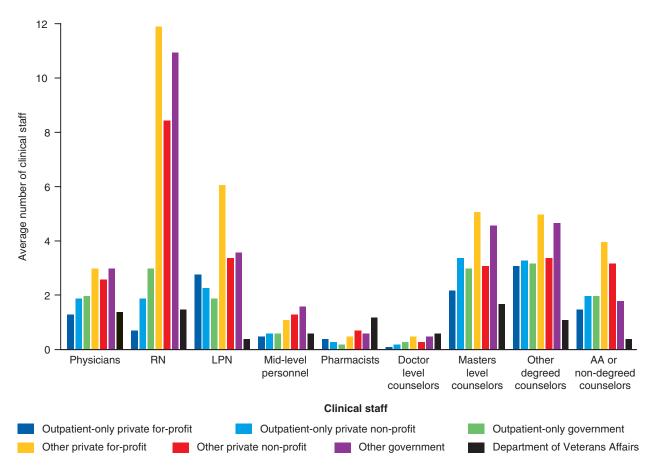


Figure 6. Average Number of Clinical Staff, by Facility Operation: 2011

40 30 Hours 20 10 Mid-level Pharmacists Doctor Masters Other AA or degreed non-degreed personnel level level counselors counselors counselors counselors Clinical staff Outpatient-only private for-profit Outpatient-only private non-profit Outpatient-only government Other private for-profit Other private non-profit Department of Veterans Affairs Other government

Figure 7. Average Number of Hours Worked, by Facility Operation: 2011

# CHAPTER 3 OTP PATIENT CHARACTERISTICS

This chapter presents national-level information on the patient characteristics reported by OTPs in the 2011 OTP survey. The survey asked two unrelated questions about the number of clients: How many admissions<sup>17</sup> were made to an OTP in calendar year 2010 and what was the total number of patients in treatment by March 31, 2011? The total number of admissions in 2010 was 244,780 [Table 3.1]. The total number of patients in treatment on the survey reference date of March 31, 2011, was 300,547 [Table 3.2].

#### Admissions in 2010

Tables 3.1, 3.3, and 3.5. During the 2010 calendar year, 244,780 admissions were made to OTPs.

Facility operation/Treatment type

- Approximately 56 percent of admissions in 2010 were in OTPs offering both maintenance and detoxification, 23 percent were in OTPs offering detoxification only, and another 22 percent were in OTPs providing maintenance only.
- Forty-two percent of admissions were in outpatient-only OTPs operated by private for-profit organizations, followed by outpatient-only private non-profit OTPs (22 percent), and other private non-profit OTPs (20 percent). OTPs operated by the Department of Veterans Affairs (VA) had 1 percent of admissions in 2010.
- Fifty-five percent of admissions at OTPs offering both maintenance and detoxification were from those outpatient-only OTPs operated by private for-profit organizations and another 23 percent were from outpatient-only OTPs operated by private non-profit organizations.
- Sixty-eight percent of admissions at OTPs offering detoxification only were at other OTPs operated by private non-profit organizations.

#### Medication dispensed

- Sixty-three percent of admissions were in OTPs that dispensed methadone only, 31 percent were in OTPs dispensing both methadone and buprenorphine, and 6 percent were in OTPs dispensing/prescribing buprenorphine only.
- OTPs that dispensed/prescribed only buprenorphine were more likely to provide detoxification only (82 percent) than OTPs providing maintenance only or both maintenance and detoxification (9 percent each). OTPs that dispensed only methadone were more likely to offer both maintenance and detoxification (51 percent) than either maintenance-only (26 percent) or detoxification-only (23 percent) treatment.

Admissions do not represent individuals. Thus, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

- OTPs operated by the Department of Veterans Affairs had fewest admissions in 2010 (less than 1 percent). The majority of their admissions were in OTPs that dispensed both methadone and buprenorphine (69 percent); no admissions were in OTPs that dispensed/prescribed buprenorphine only.
- Admissions in outpatient-only OTPs operated by a government entity were more likely to be in an OTP that dispensed methadone only than other OTPs operated by a government entity (80 percent vs. 35 percent).

#### All Patients on March 31, 2011

*Tables 3.2, 3.4, 3.5, and Figure 8.* There were 300,547 patients in Opioid Treatment Programs on March 31, 2011.

# Facility operation/Treatment type

- On March 31, 2011, approximately 65 percent of all patients were in OTPs offering both maintenance and detoxification, 35 percent were in OTPs providing maintenance only, and less than 1 percent were in OTPs offering detoxification only.
- Seventy-two percent of outpatient-only private for-profit patients and 54 percent of outpatient-only private non-profit patients were in OTPs offering both maintenance and detoxification.
- More than half (55 percent) of all patients were in outpatient-only OTPs operated by private for-profit organizations, and another 34 percent were in outpatient-only private non-profit OTPs. Other OTPs had about 3 percent of total patients. OTPs operated by the Department of Veterans Affairs had another 1 percent of total patients.
- Sixty-one percent of all patients at OTPs offering both maintenance and detoxification were at outpatient-only OTPs operated by private for-profit organizations, and another 29 percent were at outpatient-only OTPs operated by private non-profit organizations.
- Sixty-four percent of all patients at OTPs offering detoxification only were at other OTPs operated by private non-profit organizations.

#### Medication dispensed

- Seventy percent of all patients were in OTPs that dispensed methadone only, 30 percent were in OTPs dispensing both methadone and buprenorphine, and less than half of one percent were in OTPs dispensing/prescribing buprenorphine only.
- OTPs that dispensed/prescribed only buprenorphine were more likely to provide detoxification only (49 percent) than to provide both maintenance and detoxification (11 percent). OTPs that dispensed only methadone were more likely to offer both maintenance and detoxification (59 percent) than to offer either maintenance only (41 percent) or detoxification only (less than 1 percent).

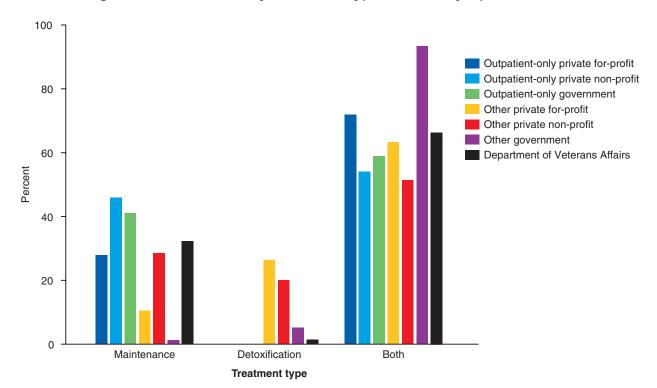


Figure 8. OTP Patients, by Treatment Type and Facility Operation: 2011

### **Patient Demographics**

Tables 3.9 and 3.10. OTPs were asked about the characteristics of all patients in treatment on March 31, 2011, including gender, age, race/ethnicity, and veteran status. Overall, the majority of patients were non-Hispanic White (57 percent). Thirteen percent were Hispanic, 11 percent were non-Hispanic Black, and 2 percent were other races or combinations of races; however, for the remaining 16 percent of admissions, race/ethnicity was unknown/not collected. Fifty-four percent of OTP patients were male and 38 percent were female, with an additional 9 percent whose gender was unknown/not collected. Patients aged 35 to 54 represented 37 percent of the patients on March 31, 2011, followed by the 18 to 34 age group (31 percent), and over 55 years of age (15 percent). Youths under the age of 18 represented less than 1 percent of the OTP patients. Age was unknown/not collected for 17 percent of patients. Three percent of OTP patients were veterans, 32 percent were non-veteran, and 65 percent reported unknown veteran status.

#### Type of care/Facility operation

■ Fifty-three percent of outpatient-only private for-profit OTP patients were male, 39 percent were female, and gender was unknown/not collected for 7 percent. Similarly, among outpatient-only private non-profit OTP patients, 50 percent were male and 38 percent were female, with gender unknown/not collected for 11 percent. Among outpatient-only government OTP patients, 65 percent were male and 31 percent were female, with gender unknown/not collected for 3 percent.

- Thirty-seven percent of patients in outpatient-only private for-profit OTPs were between 18 and 34 years of age. Similarly, 36 percent of patients in other private for-profit OTPs were between 18 and 34 years of age.
- Seventy-one percent of patients in outpatient-only private for-profit OTPs were non-Hispanic White, whereas only 33 percent of patients in other private for-profit OTPs were non-Hispanic White.
- The largest proportion of outpatient-only government patients were non-Hispanic White (29 percent), followed by patients of Hispanic origin (22 percent), and non-Hispanic Black patients (11 percent).
- Asian, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander, and two or more races combined made up less than 3 percent each of the total outpatient-only and other OTP patients, regardless of facility operation type. However, the proportions of patients of unknown/not collected race/ethnicity were high, from 12 percent of the patients at outpatient-only private for-profit OTPs to 71 percent of the patients at other government-operated OTPs.
- Veterans made up 94 percent of the Department of Veterans Affairs OTP patients.
- Outpatient-only private non-profit, private for-profit, and government OTPs each served 2 percent of the veteran community.
- The patients at OTPs operated by the Department of Veterans Affairs were predominantly male (96 percent). Half (50 percent) of them were aged 55 or over. Non-Hispanic Whites and non-Hispanic Blacks each made up about one-third of VA patients (34 and 35 percent, respectively).

#### Treatment type

- Of the three types of treatment types (maintenance only, detoxification only, and both maintenance and detoxification), detoxification only had the largest difference (32 percentage points) between gender (males, 54 percent; females, 23 percent). Less than 1 percent of OTP patients were under the age of 18 regardless of treatment type.
- Detoxification-only OTPs had higher rates for unknown/not collected for gender, age, race/ethnicity, and veteran status (23 percent, 47 percent, 52 percent, and 77 percent, respectively) than OTPs providing maintenance only or both maintenance and detoxification.

#### **Continuous Treatment**

Tables 3.11 and 3.12. As of March 31, 2011, 32 percent of all patients had been in continuous treatment at the same OTP for 2 years or longer. Sixteen percent of patients were in treatment for more than 1 year but less than 2 years, 15 percent were in treatment between 181 and 365 days, 11 percent were in treatment between 91 and 180 days, and 12 percent were in treatment between 0 and 90 days; this left 14 percent for whom OTPs could not report the length of continuous treatment.

<sup>&</sup>lt;sup>18</sup> Numbers do not add to 32 percent due to rounding.

#### Type of care/Facility operation

- The majority of patients in continuous treatment on March 31, 2011, were in outpatient-only private for-profit OTPs (55 percent), followed by outpatient-only private non-profit OTPs (34 percent) and government-operated OTPs (6 percent). Other OTPs consisted of 3 percent of patients in continuous treatment on March 31, 2011. The OTPs operated by the Department of Veterans Affairs had more than 1 percent of patients in continuous treatment on March 31, 2011.
- The highest proportion of patients in continuous treatment for 2 years or longer were at other OTPs operated by a government entity (59 percent), followed by OTPs operated by the Department of Veterans Affairs (54 percent) and outpatient-only OTPs operated by a government entity (45 percent).

# Treatment type

- OTPs offering maintenance only or both maintenance and detoxification had similar retention rates, with the largest proportions of their patients in continuous treatment for 2 years or longer (33 percent and 32 percent, respectively). However, 75 percent of patients in detoxification-only OTPs were in treatment between 0 and 90 days.
- Generally, the longer a patient was in continuous treatment, the more likely the patient was to be at an OTP that dispensed methadone only. On March 31, 2011, among patients in continuous treatment between 0 and 90 days, 62 percent were at OTPs that dispensed methadone only and 37 percent were at OTPs that dispensed both methadone and buprenorphine; however, among patients in continuous treatment for 2 years or longer, 76 percent were in OTPs that dispensed methadone only and 24 percent were in OTPs that dispensed both methadone and buprenorphine.

#### **Patients Receiving Methadone or Buprenorphine**

Tables 3.16 and 3.17. On March 31, 2011, there were 268,208 patients receiving methadone for maintenance or detoxification and 3,833 receiving buprenorphine in OTPs. Overall, most patients receiving medication at OTPs received it for maintenance (95 percent of the patients receiving methadone and 86 percent of the patients receiving buprenorphine).

#### *Type of care/Facility operation*

- Almost all patients at outpatient-only private for-profit or private non-profit OTPs received methadone for maintenance (97 percent and 95 percent, respectively), followed by about 85 percent of patients at outpatient-only or other OTPs operated by a government entity (86 percent and 85 percent, respectively) and about two thirds of patients at other OTPs operated by private non-profit or private for-profit organizations (67 percent and 62 percent, respectively). The largest proportion of patients receiving methadone for detoxification (38 percent) was at other private for-profit OTPs.
- Ninety-six percent of patients receiving buprenorphine at outpatient-only private for-profit OTPs received it for maintenance, followed by 92 percent of outpatient-only private non-profit patients, and 73 percent of outpatient-only government OTPs patients. More than half

- of patients at other private non-profit, private for-profit, and government OTPs received buprenorphine for detoxification (59 percent, 53 percent, and 52 percent, respectively).
- Ninety-six percent of methadone patients at OTPs operated by the Department of Veterans Affairs received methadone for maintenance. Eighty-seven percent of their buprenorphine patients received buprenorphine for maintenance and the remaining 13 percent received buprenorphine for detoxification.

# Treatment type

- Of 268,208 patients receiving methadone on March 31, 2011, 65 percent were in OTPs offering both maintenance and detoxification, 34 percent were in OTPs providing maintenance only, and less than one half of 1 percent were in OTPs offering detoxification only.
- Of the 3,833 patients receiving buprenorphine for maintenance or detoxification on March 31, 2011, 71 percent were in OTPs offering both maintenance and detoxification services, 24 percent were in OTPs providing maintenance only, and 5 percent were in OTPs providing detoxification only.

#### **Methadone Dosage Level**

Tables 3.14 and 3.15. There were 255,435 patients receiving methadone for maintenance on March 31, 2011. Doses ranged from less than 40 mg to 120 mg or more. About one third of OTP patients received methadone doses of 80 to 119 mg (32 percent), one quarter received doses of 40 to 79 mg (26 percent), 18 percent received doses of 120 mg or more, and 10 percent received doses of less than 40 mg. The methadone dosage level was unknown for 13 percent of patients.

# *Type of care/Facility operation*

- Regardless of facility operation type, a larger proportion of patients in outpatient-only OTPs received methadone doses of 80 to 119 mg or 120 mg or more for maintenance than those in other OTPs. About one third of patients in outpatient-only private for-profit OTPs received methadone doses of 80 to 119 mg, while 21 percent of those in other private for-profit OTPs did so.
- Dosages of 40 to 79 mg of methadone were received by 43 percent of patients in other government OTPs compared with 27 percent of patients in outpatient-only government OTPs.
- More than one third of patients in OTPs operated by the Department of Veterans Affairs received methadone doses of 80 to 119 mg and another third received doses of 120 mg or more.

#### Treatment type

mg of methadone, 26 percent received 40 to 79 mg of methadone, 17 percent received 120 mg or more, and 11 percent received less than 40 mg of methadone. The dosage level was unknown for the remaining 12 percent of patients receiving methadone. The proportions of patients receiving a particular methadone dose were fairly similar at OTPs providing maintenance only or offering both maintenance and detoxification.

#### **Buprenorphine Dosage Level**

*Tables 3.14 and 3.15.* There were 3,310 patients receiving buprenorphine for maintenance on March 31, 2011. Sixty-three percent received non-generic buprenorphine/Naloxone (Suboxone®), while 24 percent received generic buprenorphine or Subutex®.

- Among patients receiving non-generic buprenorphine/Naloxone (Suboxone®), the majority (63 percent) received a dosage between 8 and 16 mg, 18 percent received a dosage of less than 8 mg, 15 percent received a dosage between 17 and 24 mg, 4 percent received between 25 and 32 mg, and less than one half of 1 percent received more than 32 mg.
- Among patients receiving generic buprenorphine or Subutex<sup>®</sup>, the majority (73 percent) received a dosage between 8 and 16 mg, 16 percent received a dosage of less than 8 mg, 10 percent received a dosage between 17 and 24 mg, and 1 percent received a dosage between 25 and 32 mg. No patients were reported receiving doses of more than 32 mg.

# Type of care/Facility operation

- Eighty-three percent of patients in outpatient-only private non-profit OTPs who received generic buprenorphine or Subutex® for maintenance received 8 to 16 mg, and 68 percent of patients in outpatient-only private for-profit OTPs did so. All patients in other private for-profit OTPs who received generic buprenorphine or Subutex® for maintenance received 8 to 16 mg.
- Among the patients who received non-generic buprenorphine/Naloxone (Suboxone®) for maintenance, 86 percent of patients at other private for-profit OTPs, 76 percent at other government OTPs, and 73 percent at outpatient-only private non-profit OTPs received doses of 8 to 16 mg.
- All patients in the Department of Veterans Affairs operated OTPs who received generic buprenorphine or Subutex® for maintenance received 8 to 16 mg. The proportion was lower among their patients receiving non-generic buprenorphine/Naloxone (Suboxone®) for maintenance (65 percent).

#### Treatment type

- Among the patients receiving generic buprenorphine or Subutex® for maintenance, 74 percent of patients in OTPs offering both maintenance and detoxification received 8 to 16 mg, compared with 61 percent in maintenance-only OTPs. No patients in detoxification-only OTPs received generic buprenorphine or Subutex® for maintenance.
- Sixty-four percent of patients in OTPs offering both maintenance and detoxification services who received non-generic buprenorphine/Naloxone (Suboxone®) for maintenance received 8 to 16 mg compared with 61 percent in maintenance-only OTPs. Sixty five percent of patients in detoxification-only OTPs who received non-generic buprenorphine/Naloxone (Suboxone®) for maintenance received less than 8 mg.

#### **Take-home Methadone**

*Tables 3.18, 3.19, and Figure 9.* Of the 268,208 patients who received methadone on March 31, 2011, for maintenance or detoxification,<sup>19</sup> 99,934 (37 percent) had been receiving methadone for 2 years or more at the OTP that reported them. Among them, 45 percent were receiving take-home doses for 1 to 7 days, 13 percent for 8 to 14 days, and 6 percent for between 15 and 30 days. One quarter did not receive take-home doses, and no information on take-home doses was available for the remaining 10 percent.

# Type of care/Facility operation

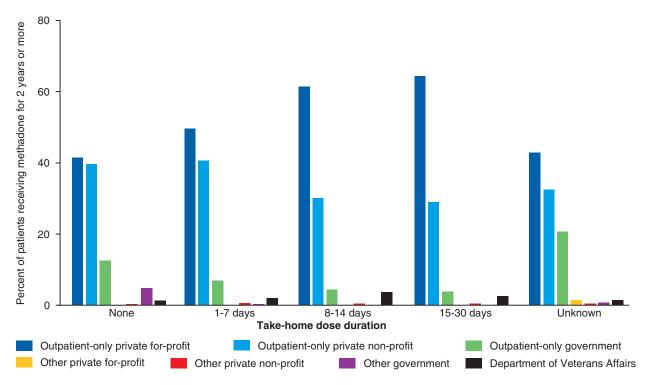
- For patients receiving take-home doses for 1 to 7 days, almost 50 percent of them were from outpatient-only private for-profit OTPs, 41 percent from outpatient-only private non-profit OTPs, and 7 percent from outpatient-only government operated OTPs. For those receiving take-home doses for 15 to 30 days, 64 percent were from outpatient-only private for-profit OTPs, 29 percent from outpatient-only private non-profit OTPs, and only 4 percent from outpatient-only government operated OTPs.
- Among the patients who had been receiving continuous treatment for 2 or more years, take-home doses for 1 to 7 days were received by 57 percent of the patients at other OTPs operated by private non-profit organizations, 49 percent at outpatient-only private non-profit OTPs, and 46 percent at outpatient-only private for-profit OTPs.
- Take-home doses for 15 to 30 days were received by less than 10 percent of patients at any type of OTP.
- Of 2,021 patients receiving take-home doses of methadone for 2 years or more at VA operated OTPs, 45 percent received take-home doses of methadone for 1 to 7 days, 24 percent for 8 to 14 days, and 8 percent for 15 to 30 days. Fifteen percent of the Department of Veterans Affairs OTPs did not receive take-home doses and no information was available for 8 percent.

#### *Treatment type*

- Among the patients who had been receiving continuous treatment for 2 or more years at OTPs offering both maintenance and detoxification, 43 percent received take-home doses for 1 to 7 days, 13 percent received take-home doses for 8 to 14 days, and 7 percent received take-home doses for 15 to 30 days.
- Among the patients who had been receiving continuous treatment for 2 or more years at OTPs offering maintenance only, 49 percent received take-home doses for 1 to 7 days, 12 percent received take-home doses for 8 to 14 days, and 5 percent received take-home doses for 15 to 30 days.

<sup>&</sup>lt;sup>19</sup> According to regulation (42CFR Part 8.12(i)(4)) take home privileges are not permitted to patients in short-term detoxification or interim maintenance. It is likely that the OTP patients in this report are receiving maintenance treatment although both types of treatment (maintenance and detoxification) are offered by the program.

Figure 9. Patients Receiving Take-home Doses of Methadone, by Facility Operation: 2011



# **TABLES**

Table 2.1. Treatment type, by facility operation: 2011 Number and percent

				F	acility operati	ion		
		C	outpatient on	ly		Other		
Treatment type	Total	Private for- profit	Private non-profit	Govern- ment <sup>1</sup>	Private for- profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
		-		Number	of facilities			•
То	tal 1,081	568	311	53	31	70	14	34
Number, by treatment type								
Maintenance only	354	163	140	26	3	10	1	11
Detoxification only	63	4			14	40	4	1
Both maintenance and detoxification	664	401	171	27	14	20	9	22
			C	Column perc	ent distributio	on		
Percent distribution, by treatment type	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Maintenance only	32.7	28.7	45.0	49.1	9.7	14.3	7.1	32.4
Detoxification only	5.8	0.7			45.2	57.1	28.6	2.9
Both maintenance and detoxification	61.4	70.6	55.0	50.9	45.2	28.6	64.3	64.7
				Row percer	nt distribution	1		
Percent distribution, by facility operation	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Maintenance only	100.0	46.0	39.5	7.3	0.8	2.8	0.3	3.1
Detoxification only	100.0	6.3			22.2	63.5	6.3	1.6
Both maintenance and detoxification	100.0	60.4	25.8	4.1	2.1	3.0	1.4	3.3

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

NOTE: Percentages may not sum to 100 percent because of rounding.

<sup>- -</sup> Quantity is zero.

Table 2.2. Type of care offered and facilities where all clients were in an OTP, by treatment type: 2011

Number and percent

						Treatme	nt type					
		Number o	of facilities			Column	percent			Row percei	nt distribut	ion
Type of care offered			Dotovi	Both main- tenance			Detoxi-	Both main- tenance			Dotovi	Both main- tenance and
		Mainte-	Detoxi- fication	and detoxi-		Mainte-	fication	and detoxi-		Mainte-	Detoxi- fication	detoxi-
	Total	nance only	only	fication	Total	nance only	only	fication	Total	nance only	only	fication
Total	1,081	354	63	664		<u> </u>			100.0	32.7	5.8	61.4
Any outpatient	1,018	346	28	644	94.2	97.7	44.4	97.0	100.0	34.0	2.8	63.3
Regular	698	221	16	461	64.6	62.4	25.4	69.4	100.0	31.7	2.3	66.0
Intensive	280	87	21	172	25.9	24.6	33.3	25.9	100.0	31.1	7.5	61.4
Day treatment/partial hospitalization	62	15	20	27	5.7	4.2	31.7	4.1	100.0	24.2	32.3	43.5
Detoxification	548	34	9	505	50.7	9.6	14.3	76.1	100.0	6.2	1.6	92.2
Methadone maintenance	971	331		640	89.8	93.5		96.4	100.0	34.1		65.9
Any residential	76	12	27	37	7.0	3.4	42.9	5.6	100.0	15.8	35.5	48.7
Short-term treatment (30 days or fewer)	63	10	24	29	5.8	2.8	38.1	4.4	100.0	15.9	38.1	46.0
Long-term treatment (more than 30 days)	42	8	11	23	3.9	2.3	17.5	3.5	100.0	19.0	26.2	54.8
Detoxification	43	2	15	26	4.0	0.6	23.8	3.9	100.0	4.7	34.9	60.5
Any hospital inpatient	84	5	45	34	7.8	1.4	71.4	5.1	100.0	6.0	53.6	40.5
Treatment	63	4	35	24	5.8	1.1	55.6	3.6	100.0	6.3	55.6	38.1
Detoxification	82	3	45	34	7.6	0.8	71.4	5.1	100.0	3.7	54.9	41.5
All clients in Opioid Treatment												
Program	771	267	6	498	71.3	75.4	9.5	75.0	100.0	34.6	0.8	64.6

<sup>- -</sup> Quantity is zero.

Table 2.3. Services provided, by facility operation: 2011 Number and percent

								Facility o	peration					•		
				Number	of faciliti	es						Colum	n percent	t		
		Οι	utpatient (	only		Other				O	utpatient d	only		Other		
Services	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
Total	1,081	568	311	53	31	70	14	34								
Assessment and pretreatment																
services	1,071	564	307	51	31	70	14	34	99.1	99.3	98.7	96.2	100.0	100.0	100.0	100.0
Screening for substance abuse	1,047	556	300	50	31	67	13	30	96.9	97.9	96.5	94.3	100.0	95.7	92.9	88.2
Comprehensive substance abuse	000	500	000	40	0.4	00	40	0.4	04.5	00.4	00.0	00.0	400.0	07.4	00.0	400.0
assessment or diagnosis Outreach to persons in community	989	506	289	48	31	68	13	34	91.5	89.1	92.9	90.6	100.0	97.1	92.9	100.0
who may need treatment	634	349	175	33	16	35	7	19	58.6	61.4	56.3	62.3	51.6	50.0	50.0	55.9
Screening for tobacco use	566	217	203	33	19	55	11	30	52.4	38.2	65.3	58.5	61.3	78.6	78.6	88.2
Screening for mental health disorders	564	182	223	37	26	58	9	29	52.4	32.0	71.7	69.8	83.9	82.9	64.3	85.3
Interim services for clients when	004	102	220	01	20	00	J	20	02.2	02.0	,	00.0	00.0	02.0	04.0	00.0
immediate admission is not possible	308	102	119	28	8	24	5	22	28.5	18.0	38.3	52.8	25.8	34.3	35.7	64.7
Comprehensive mental health							-									
assessment or diagnosis	300	51	127	22	18	43	9	30	27.8	9.0	40.8	41.5	58.1	61.4	64.3	88.2
Testing	1,079	568	310	53	31	69	14	34	99.8	100.0	99.7	100.0	100.0	98.6	100.0	100.0
Drug or alcohol urine screening	1,066	560	307	52	31	68	14	34	98.6	98.6	98.7	98.1	100.0	97.1	100.0	100.0
TB screening	1,037	556	286	48	30	69	14	34	95.9	97.9	92.0	90.6	96.8	98.6	100.0	100.0
Breathalyzer or other blood alcohol																
testing	827	420	229	44	29	61	12	32	76.5	73.9	73.6	83.0	93.5	87.1	85.7	94.1
STD testing	692	324	207	38	27	53	10	33	64.0	57.0	66.6	71.7	87.1	75.7	71.4	97.1
Screening for Hepatitis C	665	282	222	37	23	55	12	34	61.5	49.6	71.4	69.8	74.2	78.6	85.7	100.0
HIV testing	664	260	238	42	19	58	13	34	61.4	45.8	76.5	79.2	61.3	82.9	92.9	100.0
Screening for Hepatitis B	618	265	194	38	23	52	12	34	57.2	46.7	62.4	71.7	74.2	74.3	85.7	100.0
Transitional services	1,067	561	305	53	31	70	13	34	98.7	98.8	98.1	100.0	100.0	100.0	92.9	100.0
Discharge planning	1,060	560	303	51	29	70	13	34	98.1	98.6	97.4	96.2	93.5	100.0	92.9	100.0
Aftercare/continuing care	862	456	236	42	26	60	9	33	79.7	80.3	75.9	79.2	83.9	85.7	64.3	97.1
Pharmacotherapies	1,078	567	310	53	31	69	14	34	99.7	99.8	99.7	100.0	100.0	98.6	100.0	100.0
Methadone	1,056	566	301	51	30	61	13	34	97.7	99.6	96.8	96.2	96.8	87.1	92.9	100.0
Buprenorphine <sup>2</sup>	548	273	137	19	27	49	11	32	50.7	48.1	44.1	35.8	87.1	70.0	78.6	94.1
Suboxone <sup>®</sup>	539	269	134	19	26	48	11	32	49.9	47.4	43.1	35.8	83.9	68.6	78.6	94.1
Subutex <sup>®</sup> or generic	243	118	51	8	17	28	7	14	22.5	20.8	16.4	15.1	54.8	40.0	50.0	41.2
Medications for psychiatric disorders	336	36	137	23	31	62	13	34	31.1	6.3	44.1	43.4	100.0	88.6	92.9	100.0
Nicotine replacement	226	25	64	13	25	54	12	33	20.9	4.4	20.6	24.5	80.6	77.1	85.7	97.1
Naltrexone (oral)	208	59	51	8	18	36	7	29	19.2	10.4	16.4	15.1	58.1	51.4	50.0	85.3
Antabuse®	210	59	61	11	15	25	9	30	19.4	10.4	19.6	20.8	48.4	35.7	64.3	88.2
Campral <sup>®</sup>	177	41	48	10	17	27	8	26	16.4	7.2	15.4	18.9	54.8	38.6	57.1	76.5

Table 2.3. Services provided, by facility operation: 2011 (continued)

Number and percent

								Facility o	peration							
				Number	of facilitie	es						Colum	nn percen	t		
		Οι	ıtpatient (	only		Other				Οι	ıtpatient d	only		Other		
Services		Private	Private		Private	Private		Dept. of		Private	Private		Private	Private		Dept. of
		for-	non-	Govern-	for-	non-	Govern-	Veterans		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment <sup>1</sup>	profit	profit	ment <sup>1</sup>	Affairs	Total	profit	profit	ment <sup>1</sup>	profit	profit	ment 1	Affairs
Total	1,081	568	311	53	31	70	14	34								
Non-nicotine smoking/tobacco cessation medications	175	42	48	7	12	27	8	31	16.2	7.4	15.4	13.2	38.7	38.6	57.1	91.2
Vivitrol <sup>®</sup> (injectable Naltrexone)	113	41	20	2	13	14	3	20	10.5	7.2	6.4	3.8	41.9	20.0	21.4	58.8
Ancillary services	1,076	565	310	53	31	70	13	34	99.5	99.5	99.7	100.0	100.0	100.0	92.9	100.0
Substance abuse education	1,064	557	308	51	31	70	13	34	98.4	98.1	99.0	96.2	100.0	100.0	92.9	100.0
Case management services	931	502	263	46	28	50	10	32	86.1	88.4	84.6	86.8	90.3	71.4	71.4	94.1
HIV or AIDS education, counseling,																
or support	924	460	282	48	26	62	13	33	85.5	81.0	90.7	90.6	83.9	88.6	92.9	97.1
Health education other than HIV/AIDS																
or hepatitis	837	405	252	49	25	62	12	32	77.4	71.3	81.0	92.5	80.6	88.6	85.7	94.1
Hepatitis education, counseling,																
or support	819	394	248	47	26	61	12	31	75.8	69.4	79.7	88.7	83.9	87.1	85.7	91.2
Social skills development	771	412	223	33	23	43	10	27	71.3	72.5	71.7	62.3	74.2	61.4	71.4	79.4
Assistance with obtaining social																
services	719	315	254	39	21	52	10	28	66.5	55.5	81.7	73.6	67.7	74.3	71.4	82.4
Assistance in locating housing for																
clients	644	314	190	33	25	41	9	32	59.6	55.3	61.1	62.3	80.6	58.6	64.3	94.1
Early intervention for HIV	535	207	203	39	14	42	9	21	49.5	36.4	65.3	73.6	45.2	60.0	64.3	61.8
Self-help groups	523	231	138	21	31	62	13	27	48.4	40.7	44.4	39.6	100.0	88.6	92.9	79.4
Employment counseling or training																
for clients	496	261	157	25	8	15	5	25	45.9	46.0	50.5	47.2	25.8	21.4	35.7	73.5
Mentoring/peer support	463	238	124	19	16	34	8	24	42.8	41.9	39.9	35.8	51.6	48.6	57.1	70.6
Mental health services	445	105	186	33	25	53	10	33	41.2	18.5	59.8	62.3	80.6	75.7	71.4	97.1
Smoking cessation counseling	389	117	144	26	15	46	10	31	36.0	20.6	46.3	49.1	48.4	65.7	71.4	91.2
Domestic violence services	365	179	107	19	15	24	8	13	33.8	31.5	34.4	35.8	48.4	34.3	57.1	38.2
Transportation assistance to treatment	325	67	141	17	24	41	10 1	25	30.1	11.8	45.3	32.1	77.4	58.6	71.4	73.5
Child care for clients' children	58	7 27	37	6		6 7	1 1	1	5.4 7.3	1.2	11.9 8.7	11.3 17.0	0.7	8.6	7.1 7.1	2.9 14.7
Acupuncture	79 7	27	27	9	3	7 5	1	5	0.6	4.8	8.7	17.0	9.7 3.2	10.0 7.1	7.1 7.1	14.7
Residential beds for clients' children					ı	5	ı		0.0				ა.2	7.1	7.1	

Table 2.3. Services provided, by facility operation: 2011 (continued)

Number and percent

_								Facility o	peration							
<del>-</del>				Number	of facilitie	es						Row perce	ent distribu	ıtion		
<del>-</del>		Οι	ıtpatient (	only		Other				Ou	utpatient d	only		Other		
Services		Private	Private		Private	Private		Dept. of		Private	Private		Private	Private		Dept. of
Corvices		for-	non-	Govern-	for-	non-	Govern-	Veterans		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment <sup>1</sup>	profit	profit	ment <sup>1</sup>	Affairs	Total	profit	profit	ment <sup>1</sup>	profit	profit	ment <sup>1</sup>	Affairs
Total	1,081	568	311	53	31	70	14	34	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Assessment and pretreatment																
services	1,071	564	307	51	31	70	14	34	100.0	52.7	28.7	4.8	2.9	6.5	1.3	3.2
Screening for substance abuse	1,047	556	300	50	31	67	13	30	100.0	53.1	28.7	4.8	3.0	6.4	1.2	2.9
Comprehensive substance abuse	000	500	200	40	04	00	40	24	400.0	<b>540</b>	20.0	4.0		0.0	4.0	2.4
assessment or diagnosis Outreach to persons in community	989	506	289	48	31	68	13	34	100.0	51.2	29.2	4.9	3.1	6.9	1.3	3.4
who may need treatment	634	349	175	33	16	35	7	19	100.0	55.0	27.6	5.2	2.5	5.5	1.1	3.0
Screening for tobacco use	566	217	203	31	19	55	11	30	100.0	38.3	35.9	5.5	3.4	9.7	1.9	5.3
Screening for mental health disorders	564	182	223	37	26	58	9	29	100.0	32.3	39.5	6.6	4.6	10.3	1.6	5.1
Interim services for clients when	004	102	220	01	20	00	J	20	100.0	02.0	00.0	0.0	٦.٥	10.0	1.0	0.1
immediate admission is not possible	308	102	119	28	8	24	5	22	100.0	33.1	38.6	9.1	2.6	7.8	1.6	7.1
Comprehensive mental health												• • • •				
assessment or diagnosis	300	51	127	22	18	43	9	30	100.0	17.0	42.3	7.3	6.0	14.3	3.0	10.0
Testing	1,079	568	310	53	31	69	14	34	100.0	52.6	28.7	4.9	2.9	6.4	1.3	3.2
Drug or alcohol urine screening	1,066	560	307	52	31	68	14	34	100.0	52.5	28.8	4.9	2.9	6.4	1.3	3.2
TB screening	1,037	556	286	48	30	69	14	34	100.0	53.6	27.6	4.6	2.9	6.7	1.4	3.3
Breathalyzer or other blood alcohol																
testing	827	420	229	44	29	61	12	32	100.0	50.8	27.7	5.3	3.5	7.4	1.5	3.9
STD testing	692	324	207	38	27	53	10	33	100.0	46.8	29.9	5.5	3.9	7.7	1.4	4.8
Screening for Hepatitis C	665	282	222	37	23	55	12	34	100.0	42.4	33.4	5.6	3.5	8.3	1.8	5.1
HIV testing	664	260	238	42	19	58	13	34	100.0	39.2	35.8	6.3	2.9	8.7	2.0	5.1
Screening for Hepatitis B	618	265	194	38	23	52	12	34	100.0	42.9	31.4	6.1	3.7	8.4	1.9	5.5
Transitional services	1,067	561	305	53	31	70	13	34	100.0	52.6	28.6	5.0	2.9	6.6	1.2	3.2
Discharge planning	1,060	560	303	51	29	70	13	34	100.0	52.8	28.6	4.8	2.7	6.6	1.2	3.2
Aftercare/continuing care	862	456	236	42	26	60	9	33	100.0	52.9	27.4	4.9	3.0	7.0	1.0	3.8
Pharmacotherapies	1,078	567	310	53	31	69	14	34	100.0	52.6	28.8	4.9	2.9	6.4	1.3	3.2
Methadone	1,056	566	301	51	30	61	13	34	100.0	53.6	28.5	4.8	2.8	5.8	1.2	3.2
Buprenorphine <sup>2</sup>	548	273	137	19	27	49	11	32	100.0	49.8	25.0	3.5	4.9	8.9	2.0	5.8
Suboxone <sup>®</sup>	539	269	134	19	26	48	11	32	100.0	49.9	24.9	3.5	4.8	8.9	2.0	5.9
Subutex <sup>®</sup> or generic	243	118	51	8	17	28	7	14	100.0	48.6	21.0	3.3	7.0	11.5	2.9	5.8
Medications for psychiatric disorders	336	36	137	23	31	62	13	34	100.0	10.7	40.8	6.8	9.2	18.5	3.9	10.1
Nicotine replacement	226	25	64	13	25	54	12	33	100.0	11.1	28.3	5.8	11.1	23.9	5.3	14.6
Naltrexone (oral)	208	59	51	8	18	36	7	29	100.0	28.4	24.5	3.8	8.7	17.3	3.4	13.9
Antabuse <sup>®</sup>	210	59	61	11	15	25	9	30	100.0	28.1	29.0	5.2	7.1	11.9	4.3	14.3
Campral <sup>®</sup>	177	41	48	10	17	27	8	26	100.0	23.2	27.1	5.6	9.6	15.3	4.5	14.7

Table 2.3. Services provided, by facility operation: 2011 (continued)

Number and percent

								Facility o	peration							
				Number	of facilitie	es						Row perce	ent distribi	ution		
		Οι	ıtpatient d	only		Other				Οι	utpatient o	only		Other		
Services	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment 1	Dept. of Veterans Affairs
Total	1,081	568	311	53	31	70	14	34			,			•		
Non-nicotine smoking/tobacco cessation medications	175	42	48	7	12	27	8	31	100.0	24.0	27.4	4.0	6.9	15.4	4.6	17.7
Vivitrol <sup>®</sup> (injectable Naltrexone)	113	41	20	2	13	14	3	20	100.0	36.3	17.7	1.8	11.5	12.4	2.7	17.7
Ancillary services	1,076	565	310	53	31	70	13	34	100.0	52.5	28.8	4.9	2.9	6.5	1.2	3.2
Substance abuse education	1,064	557	308	51	31	70	13	34	100.0	52.3	28.9	4.8	2.9	6.6	1.2	3.2
Case management services	931	502	263	46	28	50	10	32	100.0	53.9	28.2	4.9	3.0	5.4	1.1	3.4
HIV or AIDS education, counseling, or support	924	460	282	48	26	62	13	33	100.0	49.8	30.5	5.2	2.8	6.7	1.4	3.6
Health education other than HIV/AIDS or hepatitis	837	405	252	49	25	62	12	32	100.0	48.4	30.1	5.9	3.0	7.4	1.4	3.8
Hepatitis education, counseling,																
or support	819	394	248	47	26	61	12	31	100.0	48.1	30.3	5.7	3.2	7.4	1.5	3.8
Social skills development	771	412	223	33	23	43	10	27	100.0	53.4	28.9	4.3	3.0	5.6	1.3	3.5
Assistance with obtaining social services	719	315	254	39	21	52	10	28	100.0	43.8	35.3	5.4	2.9	7.2	1.4	3.9
Assistance in locating housing for clients	644	314	190	33	25	41	9	32	100.0	48.8	29.5	5.1	3.9	6.4	1.4	5.0
Early intervention for HIV	535	207	203	39	14	42	9	21	100.0	38.7	37.9	7.3	2.6	7.9	1.7	3.9
Self-help groups Employment counseling or training	523	231	138	21	31	62	13	27	100.0	44.2	26.4	4.0	5.9	11.9	2.5	5.2
for clients	496	261	157	25	8	15	5	25	100.0	52.6	31.7	5.0	1.6	3.0	1.0	5.0
Mentoring/peer support	463	238	124	19	16	34	8	24	100.0	51.4	26.8	4.1	3.5	7.3	1.7	5.2
Mental health services	445	105	186	33	25	53	10	33	100.0	23.6	41.8	7.4	5.6	11.9	2.2	7.4
Smoking cessation counseling	389	117	144	26	15	46	10	31	100.0	30.1	37.0	6.7	3.9	11.8	2.6	8.0
Domestic violence services	365	179	107	19	15	24	8	13	100.0	49.0	29.3	5.2	4.1	6.6	2.2	3.6
Transportation assistance to treatment	325	67	141	17	24	41	10	25	100.0	20.6	43.4	5.2	7.4	12.6	3.1	7.7
Child care for clients' children	58	7	37	6		6	1	1	100.0	12.1	63.8	10.3		10.3	1.7	1.7
Acupuncture	79	27	27	9	3	7	1	5	100.0	34.2	34.2	11.4	3.8	8.9	1.3	6.3
Residential beds for clients' children	7				1	5	1		100.0				14.3	71.4	14.3	

<sup>&</sup>lt;sup>1</sup>Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> Buprenorphine total is not the sum of Subutex<sup>®</sup> and Suboxone<sup>®</sup> because a facility can provide either or both.

<sup>- -</sup> Quantity is zero.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

Table 2.4. Services provided, by treatment type: 2011 Number and percent

								ent type					
	_		Number	of facilities			Colum	nn percent			Row perce	ent distribu	ıtion
Services		Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main tenance and detoxi fication
	Total	1,081	354	63	664					100.0	32.7	5.8	61.4
Assessment and pretreatment services		1,071	348	63	660	99.1	98.3	100.0	99.4	100.0	32.5	5.9	61.6
Screening for substance abuse		1,047	335	60	652	96.9	94.6	95.2	98.2	100.0	32.0	5.7	62.3
Comprehensive substance abuse assessment		.,											
or diagnosis		989	313	60	616	91.5	88.4	95.2	92.8	100.0	31.6	6.1	62.3
Outreach to persons in community who may													
need treatment		634	196	28	410	58.6	55.4	44.4	61.7	100.0	30.9	4.4	64.7
Screening for tobacco use		566	188	47	331	52.4	53.1	74.6	49.8	100.0	33.2	8.3	58.5
Screening for mental health disorders		564	194	49	321	52.2	54.8	77.8	48.3	100.0	34.4	8.7	56.9
Interim services for clients when immediate													
admission is not possible		308	100	14	194	28.5	28.2	22.2	29.2	100.0	32.5	4.5	63.0
Comprehensive mental health assessment or													
diagnosis		300	93	37	170	27.8	26.3	58.7	25.6	100.0	31.0	12.3	56.7
Testing		1,079	352	63	664	99.8	99.4	100.0	100.0	100.0	32.6	5.8	61.5
Drug or alcohol urine screening		1,066	350	62	654	98.6	98.9	98.4	98.5	100.0	32.8	5.8	61.4
TB screening		1,037	330	63	644	95.9	93.2	100.0	97.0	100.0	31.8	6.1	62.1
Breathalyzer or other blood alcohol testing		827	245	57	525	76.5	69.2	90.5	79.1	100.0	29.6	6.9	63.5
STD testing		692	220	53	419	64.0	62.1	84.1	63.1	100.0	31.8	7.7	60.5
Screening for Hepatitis C		665	209	52	404	61.5	59.0	82.5	60.8	100.0	31.4	7.8	60.8
HIV testing		664	210	55	399	61.4	59.3	87.3	60.1	100.0	31.6	8.3	60.1
Screening for Hepatitis B		618	196	51	371	57.2	55.4	81.0	55.9	100.0	31.7	8.3	60.0
Transitional services		1,067	343	63	661	98.7	96.9	100.0	99.5	100.0	32.1	5.9	61.9
Discharge planning		1,060	338	63	659	98.1	95.5	100.0	99.2	100.0	31.9	5.9	62.2
Aftercare/continuing care		862	268	50	544	79.7	75.7	79.4	81.9	100.0	31.1	5.8	63.1
Pharmacotherapies		1,078	351	63	664	99.7	99.2	100.0	100.0	100.0	32.6	5.8	61.6
Methadone		1,056	339	56	661	97.7	95.8	88.9	99.5	100.0	32.1	5.3	62.6
Buprenorphine <sup>1</sup>		548	124	47	377	50.7	35.0	74.6	56.8	100.0	22.6	8.6	68.8
Suboxone <sup>®</sup>		539	123	45	371	49.9	34.7	71.4	55.9	100.0	22.8	8.3	68.8
Subutex <sup>®</sup> or generic		243	49	28	166	22.5	13.8	44.4	25.0	100.0	20.2	11.5	68.3
Medications for psychiatric disorders		336	106	56	174	31.1	29.9	88.9	26.2	100.0	31.5	16.7	51.8
Nicotine replacement		226	55	54	117	20.9	15.5	85.7	17.6	100.0	24.3	23.9	51.8
Naltrexone (oral)		208	38	38	132	19.2	10.7	60.3	19.9	100.0	18.3	18.3	63.5
Antabuse®		210	49	29	132	19.4	13.8	46.0	19.9	100.0	23.3	13.8	62.9
Campral <sup>®</sup>		-				_							
•		177	39	31	107	16.4	11.0	49.2	16.1	100.0	22.0	17.5	60.5
Non-nicotine smoking/tobacco cessation medication	15	175	47	25	103	16.2	13.3	39.7	15.5	100.0	26.9	14.3	58.9
Vivitrol <sup>®</sup> (injectable Naltrexone)		113	15	16	82	10.5	4.2	25.4	12.3	100.0	13.3	14.2	72.6
0 " 10 " 15"													

Table 2.4. Services provided, by treatment type: 2011 (continued)

Number and percent

					T una perce		Treatme	ent type					
	_		Number	of facilities			Colum	n percent			Row perce	ent distribu	ition
	_				Both main-				Both main-				Both main-
Services			Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
			nance	fication	and detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
		Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
	Total	1,081	354	63	664								
Ancillary services		1,076	350	63	663	99.5	98.9	100.0	99.8	100.0	32.5	5.9	61.6
Substance abuse education		1,064	344	63	657	98.4	97.2	100.0	98.9	100.0	32.3	5.9	61.7
Case management services		931	287	47	597	86.1	81.1	74.6	89.9	100.0	30.8	5.0	64.1
HIV or AIDS education, counseling, or support		924	296	54	574	85.5	83.6	85.7	86.4	100.0	32.0	5.8	62.1
Health education other than HIV/AIDS or hepatitis		837	263	50	524	77.4	74.3	79.4	78.9	100.0	31.4	6.0	62.6
Hepatitis education, counseling, or support		819	265	54	500	75.8	74.9	85.7	75.3	100.0	32.4	6.6	61.1
Social skills development		771	238	37	496	71.3	67.2	58.7	74.7	100.0	30.9	4.8	64.3
Assistance with obtaining social services		719	234	41	444	66.5	66.1	65.1	66.9	100.0	32.5	5.7	61.8
Assistance in locating housing for clients		644	178	33	433	59.6	50.3	52.4	65.2	100.0	27.6	5.1	67.2
Early intervention for HIV		535	170	32	333	49.5	48.0	50.8	50.2	100.0	31.8	6.0	62.2
Self-help groups		523	131	55	337	48.4	37.0	87.3	50.8	100.0	25.0	10.5	64.4
Employment counseling or training for clients		496	160	13	323	45.9	45.2	20.6	48.6	100.0	32.3	2.6	65.1
Mentoring/peer support		463	129	29	305	42.8	36.4	46.0	45.9	100.0	27.9	6.3	65.9
Mental health services		445	148	43	254	41.2	41.8	68.3	38.3	100.0	33.3	9.7	57.1
Smoking cessation counseling		389	123	42	224	36.0	34.7	66.7	33.7	100.0	31.6	10.8	57.6
Domestic violence services		365	111	20	234	33.8	31.4	31.7	35.2	100.0	30.4	5.5	64.1
Transportation assistance to treatment		325	112	38	175	30.1	31.6	60.3	26.4	100.0	34.5	11.7	53.8
Child care for clients' children		58	21	1	36	5.4	5.9	1.6	5.4	100.0	36.2	1.7	62.1
Acupuncture		79	23	4	52	7.3	6.5	6.3	7.8	100.0	29.1	5.1	65.8
Residential beds for clients' children		7	1		6	0.6	0.3		0.9	100.0	14.3		85.7

<sup>&</sup>lt;sup>1</sup> Buprenorphine total is not the sum of Subutex<sup>®</sup> and Suboxone<sup>®</sup> because a facility can provide either or both.

<sup>- -</sup> Quantity is zero.

Table 2.5. Facilities offering special programs or groups for specific client types, by facility operation: 2011

Number and percent

				Facility o	peration			
- Constitution and a supplier of the state o		O(	utpatient o	nly		Other		
Special programs or groups for specific client		Private	Private		Private	Private		Dept. of
types		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs
				Number o	f facilities			
Total	1,081	568	311	53	31	70	14	34
Any program or group	787	369	253	46	27	50	13	29
Clients with co-occurring disorders	331	111	120	20	14	34	10	22
Adult women	477	202	162	39	18	28	9	19
Adolescents	59	10	24	4	6	12	3	
DUI/DWI clients	129	75	35	5	4	7	2	1
Criminal justice clients	146	47	61	13	7	12	4	2
Adult men	310	123	109	25	15	21	8	9
Pregnant or postpartum women	450	253	141	29	4	18	5	
Persons with HIV or AIDS	215	71	101	17	4	15	5	2
Seniors or older adults	107	39	43	3	3	9	2	8
LGBT <sup>2</sup>	76	36	21	5	4	8	2	
Other	129	53	47	5	6	7	3	8
				Column	percent			
Any program or group	72.8	65.0	81.4	86.8	87.1	71.4	92.9	85.3
Clients with co-occurring disorders	30.6	19.5	38.6	37.7	45.2	48.6	71.4	64.7
Adult women	44.1	35.6	52.1	73.6	58.1	40.0	64.3	55.9
Adolescents	5.5	1.8	7.7	7.5	19.4	17.1	21.4	
DUI/DWI clients	11.9	13.2	11.3	9.4	12.9	10.0	14.3	2.9
Criminal justice clients	13.5	8.3	19.6	24.5	22.6	17.1	28.6	5.9
Adult men	28.7	21.7	35.0	47.2	48.4	30.0	57.1	26.5
Pregnant or postpartum women	41.6	44.5	45.3	54.7	12.9	25.7	35.7	
Persons with HIV or AIDS	19.9	12.5	32.5	32.1	12.9	21.4	35.7	5.9
Seniors or older adults	9.9	6.9	13.8	5.7	9.7	12.9	14.3	23.5
LGBT <sup>2</sup>	7.0	6.3	6.8	9.4	12.9	11.4	14.3	
Other	11.9	9.3	15.1	9.4	19.4	10.0	21.4	23.5
			I	Row percent	t distributio	n		
Any program or group	100.0	46.9	32.1	5.8	3.4	6.4	1.7	3.7
Clients with co-occurring disorders	100.0	33.5	36.3	6.0	4.2	10.3	3.0	6.6
Adult women	100.0	42.3	34.0	8.2	3.8	5.9	1.9	4.0
Adolescents	100.0	16.9	40.7	6.8	10.2	20.3	5.1	
DUI/DWI clients	100.0	58.1	27.1	3.9	3.1	5.4	1.6	0.8
Criminal justice clients	100.0	32.2	41.8	8.9	4.8	8.2	2.7	1.4
Adult men	100.0	39.7	35.2	8.1	4.8	6.8	2.6	2.9
Pregnant or postpartum women	100.0	56.2	31.3	6.4	0.9	4.0	1.1	
Persons with HIV or AIDS	100.0	33.0	47.0	7.9	1.9	7.0	2.3	0.9
Seniors or older adults	100.0	36.4	40.2	2.8	2.8	8.4	1.9	7.5
LGBT <sup>2</sup>	100.0	47.4	27.6	6.6	5.3	10.5	2.6	
Other	100.0	41.1	36.4	3.9	4.7	5.4	2.3	6.2

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> LGBT = Lesbian, gay, bisexual, or transgender.

<sup>- -</sup> Quantity is zero.

Table 2.6. Facilities offering special programs or groups for specific client types, by treatment type: 2011

Number and percent

						Treatn	nent type					
		Number	of facilities			Colum	n percent			Row perce	nt distributi	on
Special programs or groups for specific				Both main-				Both main-				Both main-
client types		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
		nance	fication	and detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Total	1,081	354	63	664					100.0	32.7	5.8	61.4
Any program or group	787	250	46	491	72.8	70.6	73.0	73.9	100.0	31.8	5.8	62.4
Clients with co-occurring disorders	331	92	34	205	30.6	26.0	54.0	30.9	100.0	27.8	10.3	61.9
Adult women	477	157	24	296	44.1	44.4	38.1	44.6	100.0	32.9	5.0	62.1
Adolescents	59	19	10	30	5.5	5.4	15.9	4.5	100.0	32.2	16.9	50.8
DUI/DWI clients	129	34	3	92	11.9	9.6	4.8	13.9	100.0	26.4	2.3	71.3
Criminal justice clients	146	46	5	95	13.5	13.0	7.9	14.3	100.0	31.5	3.4	65.1
Adult men	310	107	19	184	28.7	30.2	30.2	27.7	100.0	34.5	6.1	59.4
Pregnant or postpartum women	450	122	12	316	41.6	34.5	19.0	47.6	100.0	27.1	2.7	70.2
Persons with HIV or AIDS	215	57	8	150	19.9	16.1	12.7	22.6	100.0	26.5	3.7	69.8
Seniors or older adults	107	34	7	66	9.9	9.6	11.1	9.9	100.0	31.8	6.5	61.7
LGBT <sup>1</sup>	76	22	6	48	7.0	6.2	9.5	7.2	100.0	28.9	7.9	63.2
Other	129	39	10	80	11.9	11.0	15.9	12.0	100.0	30.2	7.8	62.0

<sup>&</sup>lt;sup>1</sup>LGBT = Lesbian, gay, bisexual, or transgender.

Table 2.7. Facilities offering services in sign language for the hearing impaired and in languages other than English, by facility operation: 2011

Number and percent

					Facility	operation			
	_		0	utpatient o			Other		
Facility language services		Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
					Number o	of facilities			
	Total	1,081	568	311	53	31	70	14	34
Sign language		279	88	101	22	12	40	9	7
Any language other than English		638	284	224	38	21	49	11	11
Language services provided by									
Staff counselor only <sup>2</sup>		320	160	123	12	8	14	1	2
On-call interpreter only <sup>3</sup>		134	57	44	10	4	13	1	5
Both staff counselor and on-call interpreter		184	67	57	16	9	22	9	4
Languages provided by staff counselor <sup>2</sup>									
Spanish		489	217	176	27	17	36	10	6
American Indian/Alaska Native language		8	6	1				1	
Other		197	105	53	8	7	17	5	2
			-		Column	percent			•
Sign language		25.8	15.5	32.5	41.5	38.7	57.1	64.3	20.6
Any language other than English		59.0	50.0	72.0	71.7	67.7	70.0	78.6	32.4
Language services provided by									
Staff counselor only <sup>2</sup>		29.6	28.2	39.5	22.6	25.8	20.0	7.1	5.9
On-call interpreter only <sup>3</sup>		12.4	10.0	14.1	18.9	12.9	18.6	7.1	14.7
Both staff counselor and on-call interpreter		17.0	11.8	18.3	30.2	29.0	31.4	64.3	11.8
Languages provided by staff counselor <sup>2</sup>									
Spanish		45.2	38.2	56.6	50.9	54.8	51.4	71.4	17.6
American Indian/Alaska Native language		0.7	1.1	0.3				7.1	
Other		18.2	18.5	17.0	15.1	22.6	24.3	35.7	5.9
					Row percer	nt distributio	n		
Sign language		100.0	31.5	36.2	7.9	4.3	14.3	3.2	2.5
Any language other than English		100.0	44.5	35.1	6.0	3.3	7.7	1.7	1.7
Language services provided by									
Staff counselor only <sup>2</sup>		100.0	50.0	38.4	3.8	2.5	4.4	0.3	0.6
On-call interpreter only <sup>3</sup>		100.0	42.5	32.8	7.5	3.0	9.7	0.7	3.7
Both staff counselor and on-call interpreter		100.0	36.4	31.0	8.7	4.9	12.0	4.9	2.2
Languages provided by staff counselor <sup>2</sup>									
Spanish		100.0	44.4	36.0	5.5	3.5	7.4	2.0	1.2
American Indian/Alaska Native language		100.0	75.0	12.5				12.5	
Other		100.0	53.3	26.9	4.1	3.6	8.6	2.5	1.0

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> Number of facilities based on facilities where languages services are provided by staff counselors only and by both staff counselors and oncall interpreters.

<sup>&</sup>lt;sup>3</sup> Facilities that offered services in any language other than English but did not have a valid response to language provider were classified as providing services by an on-call interpreter only.

<sup>- -</sup> Quantity is zero.

Table 2.8. Facilities offering services in sign language for the hearing impaired and in languages other than English, by treatment type: 2011

Number and percent

						Treati	ment type					
		Number	of facilitie	S		Colun	nn percent			Row perce	ent distribu	ıtion
Facility language services				Both main-				Both main-				Both main-
Tacility language services		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
		nance	fication	and detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
	1,081	354	63	664					100.0	32.7	5.8	61.4
Sign language	279	92	36	151	25.8	26.0	57.1	22.7	100.0	33.0	12.9	54.1
Any language other than English	638	193	43	402	59.0	54.5	68.3	60.5	100.0	30.3	6.7	63.0
Language services provided by												
Staff counselor only <sup>1</sup>	320	95	10	215	29.6	26.8	15.9	32.4	100.0	29.7	3.1	67.2
On-call interpreter only <sup>2</sup>	134	54	9	71	12.4	15.3	14.3	10.7	100.0	40.3	6.7	53.0
Both staff counselor and on-call interpreter	184	44	24	116	17.0	12.4	38.1	17.5	100.0	23.9	13.0	63.0
Languages provided by staff counselor <sup>1</sup>												
Spanish	489	132	34	323	45.2	37.3	54.0	48.6	100.0	27.0	7.0	66.1
American Indian/Alaska Native language	8			8	0.7			1.2	100.0			100.0
Other	197	46	20	131	18.2	13.0	31.7	19.7	100.0	23.4	10.2	66.5

<sup>&</sup>lt;sup>1</sup> Number of facilities based on facilities where languages services are provided by staff counselors only and by both staff counselors and on-call interpreters.

<sup>&</sup>lt;sup>2</sup> Facilities that offered services in any language other than English but did not have a valid response to language provider were classified as providing services by an on-call interpreter only.

<sup>- -</sup> Quantity is zero.

Table 2.9. Facilities detoxifying clients, by type of substance used, routine use of medications during detoxification, and facility operation: 2011

Number and percent

				Fa	cility opera	tion		
		0	utpatient or	nly		Other		
Detoxification		Private	Private		Private	Private		Dept. of
		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs
		•		Number of	facilities			
Total	1,081	568	311	53	31	70	14	34
Detoxification from:	635	354	134	18	28	62	12	27
Opiates	581	316	122	17	28	59	12	27
Alcohol	154	22	13	3	28	55	11	22
Benzodiazepines	163	30	15	4	27	53	10	24
Cocaine	115	24	12	4	23	28	7	17
Methamphetamines	109	18	11	3	22	31	9	15
Other substances	37	12	5	2	7	9	2	
Routine use of medications during								
detoxification	561	307	116	15	27	57	12	27
		•		Column				
Detoxification from:	58.7	62.3	43.1	34.0	90.3	88.6	85.7	79.4
Opiates	53.7	55.6	39.2	32.1	90.3	84.3	85.7	79.4
Alcohol	14.2	3.9	4.2	5.7	90.3	78.6	78.6	64.7
Benzodiazepines	15.1	5.3	4.8	7.5	87.1	75.7	71.4	70.6
Cocaine	10.6	4.2	3.9	7.5	74.2	40.0	50.0	50.0
Methamphetamines	10.1	3.2	3.5	5.7	71.0	44.3	64.3	44.1
Other substances	3.4	2.1	1.6	3.8	22.6	12.9	14.3	
Routine use of medications during								
detoxification	51.9	54.0	37.3	28.3	87.1	81.4	85.7	79.4
	100.0			ow percent			4.0	- 4.0
Detoxification from:	100.0	55.7	21.1	2.8	4.4	9.8	1.9	4.3
Opiates	100.0	54.4	21.0	2.9	4.8	10.2	2.1	4.6
Alcohol	100.0	14.3	8.4	1.9	18.2	35.7	7.1	14.3
Benzodiazepines	100.0	18.4	9.2	2.5	16.6	32.5	6.1	14.7
Cocaine	100.0	20.9	10.4	3.5	20.0	24.3	6.1	14.8
Methamphetamines	100.0	16.5	10.1	2.8	20.2	28.4	8.3	13.8
Other substances	100.0	32.4	13.5	5.4	18.9	24.3	5.4	
Routine use of medications during detoxification	100.0	E 4 7	20.7	2.7	4.0	10.2	2.1	4.0
uetoxinication	100.0	54.7	20.7	2.7	4.8	10.2	2.1	4.8

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

NOTE: Percentages may not sum to 100 percent because of rounding.

<sup>- -</sup> Quantity is zero.

Table 2.10. Facilities detoxifying clients, by type of substance used, routine use of medications during detoxification, and treatment type: 2011

Number and percent

							Treati	ment type					
		Number of facilities           Mainte- nance         Detoxi- fication           Total         only         only           I 1,081         354         63           635         38         62           581         23         62			es .		Colun	nn percent			Row perce	ent distribu	tion
Detoxification					Both main-				Both main-				Both main-
			Mainte-		tenance and		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
			nance	fication	detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
		Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
	Total	1,081	354	63	664					100.0	32.7	5.8	61.4
Detoxification from:		635	38	62	535	58.7	10.7	98.4	80.6	100.0	6.0	9.8	84.3
Opiates		581	23	62	496	53.7	6.5	98.4	74.7	100.0	4.0	10.7	85.4
Alcohol		154	8	57	89	14.2	2.3	90.5	13.4	100.0	5.2	37.0	57.8
Benzodiazepines		163	9	53	101	15.1	2.5	84.1	15.2	100.0	5.5	32.5	62.0
Cocaine		115	7	31	77	10.6	2.0	49.2	11.6	100.0	6.1	27.0	67.0
Methamphetamines		109	5	34	70	10.1	1.4	54.0	10.5	100.0	4.6	31.2	64.2
Other substances		37	2	11	24	3.4	0.6	17.5	3.6	100.0	5.4	29.7	64.9
Routine use of medications during													
detoxification		561	23	61	477	51.9	6.5	96.8	71.8	100.0	4.1	10.9	85.0

NOTE: Percentages may not sum to 100 percent because of rounding.

Table 2.11. Facility licensing, certification, or accreditation, by facility operation: 2011

Number and percent

				Facility o	peration			
		C	outpatient only	У		Other		
Facility licensing, certification, or accreditation	on							Dept. of
		Private	Private	Govern-	Private	Private	Govern-	Veterans
	Total	for-profit	non-profit	ment 1	for-profit	non-profit	ment 1	Affairs
				Number of	facilities			
To	otal 1,081	568	311	53	31	70	14	34
Any listed agency/organization	1,079	566	311	53	31	70	14	34
State substance abuse agency	987	533	298	52	28	61	12	3
State mental health department	295	142	95	18	12	22	5	1
State department of health	631	307	205	33	19	57	10	
Hospital licensing authority	85	8	20	9	10	26	5	7
Joint Commission <sup>2</sup>	311	74	101	25	23	47	7	34
CARF <sup>2</sup>	724	463	188	26	8	20	5	14
NCQA <sup>2</sup>	36	14	6	4	4	4	2	2
COA <sup>2</sup>	64	33	21	2	1	4	1	2
Other state/local agency/organization	108	63	31	4	3	3	1	3
				Column	percent			
Any listed agency/organization	99.8	99.6	100.0	100.0	100.0	100.0	100.0	100.0
State substance abuse agency	91.3	93.8	95.8	98.1	90.3	87.1	85.7	8.8
State mental health department	27.3	25.0	30.5	34.0	38.7	31.4	35.7	2.9
State department of health	58.4	54.0	65.9	62.3	61.3	81.4	71.4	
Hospital licensing authority	7.9	1.4	6.4	17.0	32.3	37.1	35.7	20.6
Joint Commission <sup>2</sup>	28.8	13.0	32.5	47.2	74.2	67.1	50.0	100.0
CARF <sup>2</sup>	67.0	81.5	60.5	49.1	25.8	28.6	35.7	41.2
NCQA <sup>2</sup>	3.3	2.5	1.9	7.5	12.9	5.7	14.3	5.9
COA <sup>2</sup>	5.9	5.8	6.8	3.8	3.2	5.7	7.1	5.9
Other state/local agency/organization	10.0	11.1	10.0	7.5	9.7	4.3	7.1	8.8
cure cure, com agone, programment					distribution			
Any listed agency/organization	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.2
State substance abuse agency	100.0	54.0	30.2	5.3	2.8	6.2	1.2	0.3
State mental health department	100.0	48.1	32.2	6.1	4.1	7.5	1.7	0.3
State department of health	100.0	48.7	32.5	5.2	3.0	9.0	1.6	
Hospital licensing authority	100.0	9.4	23.5	10.6	11.8	30.6	5.9	8.2
Joint Commission <sup>2</sup>	100.0	23.8	32.5	8.0	7.4	15.1	2.3	10.9
CARF <sup>2</sup>	100.0	64.0	26.0	3.6	1.1	2.8	0.7	1.9
NCQA <sup>2</sup>	100.0	38.9	16.7	11.1	11.1	11.1	5.6	5.6
COA <sup>2</sup>	100.0	51.6	32.8	3.1	1.6	6.3	1.6	3.1
Other state/local agency/organization	100.0	58.3	28.7	3.7	2.8	2.8	0.9	2.8

<sup>&</sup>lt;sup>1</sup>Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

NOTE: In order for a substance abuse treatment facility to operate a SAMHSA-approved Opioid Treatment Program (OTP), the facility must be accredited by a SAMHSA-approved accrediting body. A substance abuse treatment facility may also be licensed or approved by other licensing or accrediting organizations for substance abuse treatment. The SAMHSA-approved OTP accrediting bodies include: the Commission on Accreditation of Rehabilitation Facilities (CARF), Council on Accreditation (COA), State of Missouri Department of Mental Health Division of Alcohol and Drug Abuse, Washington Department of Social and Health Services Division of Alcohol and Substance Abuse, the Joint Commission, National Commission Correctional Health Care, and Healthcare Facilities Accreditation Program (HFAP).

<sup>&</sup>lt;sup>2</sup> Joint Commission was formerly JCAHO (Joint Commission on Accreditation of Healthcare Organizations); CARF was formerly Commission on Accreditation of Rehabilitation Facilities; NCQA = National Committee for Quality Assurance; COA = Council on Accreditation.

<sup>- -</sup> Quantity is zero.

Table 2.12. Facility licensing, certification, or accreditation, by treatment type: 2011

Number and percent

						Treatn	nent type					
		Number	of facilities			Colum	n percent			Row perce	nt distributi	on
Facility licensing, certification, or				Both main-				Both main-				Both main-
accreditation		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
		nance	fication	and detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
То	tal 1,081	354	63	664					100.0	32.7	5.8	61.4
Any listed agency/organization	1,079	352	63	664	99.8	99.4	100.0	100.0	100.0	32.6	5.8	61.5
State substance abuse agency	987	314	51	622	91.3	88.7	81.0	93.7	100.0	31.8	5.2	63.0
State mental health department	295	91	17	187	27.3	25.7	27.0	28.2	100.0	30.8	5.8	63.4
State department of health	631	227	48	356	58.4	64.1	76.2	53.6	100.0	36.0	7.6	56.4
Hospital licensing authority	85	23	24	38	7.9	6.5	38.1	5.7	100.0	27.1	28.2	44.7
Joint Commission <sup>1</sup>	311	116	47	148	28.8	32.8	74.6	22.3	100.0	37.3	15.1	47.6
CARF <sup>1</sup>	724	222	13	489	67.0	62.7	20.6	73.6	100.0	30.7	1.8	67.5
NCQA <sup>1</sup>	36	5	7	24	3.3	1.4	11.1	3.6	100.0	13.9	19.4	66.7
COA <sup>1</sup>	64	11	1	52	5.9	3.1	1.6	7.8	100.0	17.2	1.6	81.3
Other state/local agency/organization	108	28	4	76	10.0	7.9	6.3	11.4	100.0	25.9	3.7	70.4

<sup>&</sup>lt;sup>1</sup>Joint Commission was formerly JCAHO (Joint Commission on Accreditation of Healthcare Organizations); CARF was formerly Commission on Accreditation of Rehabilitation Facilities; NCQA = National Committee for Quality Assurance; COA = Council on Accreditation.

NOTE: In order for a substance abuse treatment facility to operate a SAMHSA-approved Opioid Treatment Program (OTP), the facility must be accredited by a SAMHSA-approved accrediting body. A substance abuse treatment facility may also be licensed or approved by other licensing or accrediting organizations for substance abuse treatment. The SAMHSA-approved OTP accrediting bodies include: the Commission on Accreditation of Rehabilitation Facilities (CARF), Council on Accreditation (COA), State of Missouri Department of Mental Health Division of Alcohol and Drug Abuse, Washington Department of Social and Health Services Division of Alcohol and Substance Abuse, the Joint Commission, National Commission Correctional Health Care, and Healthcare Facilities Accreditation Program (HFAP).

Table 2.13. Facilities employing specific practices as part of their standard operating procedures, by facility operation: 2011

Number and percent

				Facility (	operation			
-		(	Outpatient onl	у		Other		Dept. of
Standard operating procedures		Private	Private	Govern-	Private	Private	Govern-	Veterans
	Total	for-profit	non-profit	ment 1	for-profit	non-profit	ment 1	Affairs
			,	Number o	of facilities	,		
Total T	1,081	568	311	53	31	70	14	34
Standard operating procedures								
Required continuing education for staff	1,066	559	306	53	31	69	14	34
Regularly scheduled case review with supervisor	1,069	562	308	53	31	69	14	32
Periodic client satisfaction surveys conducted by								
facility	1,077	567	311	52	31	69	14	33
Periodic drug testing of clients	1,067	567	311	53	30	61	11	34
Periodic utilization review	992	513	295	48	31	68	13	24
Case review by appointed quality review committee	926	478	277	46	28	56	12	29
Outcome follow-up after discharge	873	523	214	31	26	52	9	18
_				Column	percent			
Standard operating procedures								
Required continuing education for staff	98.6	98.4	98.4	100.0	100.0	98.6	100.0	100.0
Regularly scheduled case review with supervisor Periodic client satisfaction surveys conducted by	98.9	98.9	99.0	100.0	100.0	98.6	100.0	94.1
facility	99.6	99.8	100.0	98.1	100.0	98.6	100.0	97.1
Periodic drug testing of clients	98.7	99.8	100.0	100.0	96.8	87.1	78.6	100.0
Periodic utilization review	91.8	90.3	94.9	90.6	100.0	97.1	92.9	70.6
Case review by appointed quality review committee	85.7	84.2	89.1	86.8	90.3	80.0	85.7	85.3
Outcome follow-up after discharge	80.8	92.1	68.8	58.5	83.9	74.3	64.3	52.9
_		-		Row percen	t distribution			
Standard operating procedures								
Required continuing education for staff	100.0	52.4	28.7	5.0	2.9	6.5	1.3	3.2
Regularly scheduled case review with supervisor	100.0	52.6	28.8	5.0	2.9	6.5	1.3	3.0
Periodic client satisfaction surveys conducted by								
facility	100.0	52.6	28.9	4.8	2.9	6.4	1.3	3.1
Periodic drug testing of clients	100.0	53.1	29.1	5.0	2.8	5.7	1.0	3.2
Periodic utilization review	100.0	51.7	29.7	4.8	3.1	6.9	1.3	2.4
Case review by appointed quality review committee	100.0	51.6	29.9	5.0	3.0	6.0	1.3	3.1
Outcome follow-up after discharge	100.0	59.9	24.5	3.6	3.0	6.0	1.0	2.1

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.14. Facilities employing specific practices as part of their standard operating procedures, by treatment type: 2011

Number and percent

						Treatr	nent type					
		Number	of facilitie	s		Colum	n percent			Row perce	ent distribu	ıtion
Standard operating procedures				Both main-				Both main-				Both main-
Startadra operating procedures		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance		Mainte-	Detoxi-	tenance
		nance	fication	and detoxi-		nance	fication	and detoxi-		nance	fication	and detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Tota	ıl 1,081	354	63	664					100.0	32.7	5.8	61.4
Standard operating procedures												
Required continuing education for staff	1,066	351	62	653	98.6	99.2	98.4	98.3	100.0	32.9	5.8	61.3
Regularly scheduled case review with supervisor	1,069	351	63	655	98.9	99.2	100.0	98.6	100.0	32.8	5.9	61.3
Periodic client satisfaction surveys conducted by												
facility	1,077	352	62	663	99.6	99.4	98.4	99.8	100.0	32.7	5.8	61.6
Periodic drug testing of clients	1,067	352	55	660	98.7	99.4	87.3	99.4	100.0	33.0	5.2	61.9
Periodic utilization review	992	320	61	611	91.8	90.4	96.8	92.0	100.0	32.3	6.1	61.6
Case review by appointed quality review committee	926	304	53	569	85.7	85.9	84.1	85.7	100.0	32.8	5.7	61.4
Outcome follow-up after discharge	873	260	45	568	80.8	73.4	71.4	85.5	100.0	29.8	5.2	65.1

Table 2.15. Facility payment options and facilities receiving public funding, by facility operation: 2011

Number and percent

					Facility o	peration			
	_			Outpatient only	/		Other		Dont of
Faciltiy payment options		Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
					Number o	f facilities	•		ļ
	Total	1,081	568	311	53	31	70	14	34
Type of client payments accepted									
Cash or self-payment		1,045	566	299	49	31	65	13	22
Private health insurance		529	188	180	26	30	62	12	31
Medicare		292	82	118	17	11	42	8	14
Medicaid		699	265	286	38	21	64	13	12
State financed health insurance		347	114	127	25	15	47	10	9
Federal military insurance		205	67	51	10	13	29	7	28
No payment accepted		6			3			1	2
Access to Recovery (ATR) vouchers <sup>2</sup>		77	19	40	6	2	9	1	
IHS/638 contract care funds		17	6	4	2	1	2	1	1
Other		8	6	2					
Sliding fee scale		505	141	257	37	11	41	10	8
Treatment at no charge for clients									
who cannot pay		320	49	137	37	10	44	11	32
Receives public funds for substance									
abuse treatment programs		484	113	238	48	9	36	11	29
					Column	percent			
Type of client payments accepted									
Cash or self-payment		96.7	99.6	96.1	92.5	100.0	92.9	92.9	64.7
Private health insurance		48.9	33.1	57.9	49.1	96.8	88.6	85.7	91.2
Medicare		27.0	14.4	37.9	32.1	35.5	60.0	57.1	41.2
Medicaid		64.7	46.7	92.0	71.7	67.7	91.4	92.9	35.3
State financed health insurance		32.1	20.1	40.8	47.2	48.4	67.1	71.4	26.5
Federal military insurance		19.0	11.8	16.4	18.9	41.9	41.4	50.0	82.4
No payment accepted		0.6			5.7			7.1	5.9
Access to Recovery (ATR) vouchers <sup>2</sup>		7.1	3.3	12.9	11.3	6.5	12.9	7.1	
IHS/638 contract care funds		1.6	1.1	1.3	3.8	3.2	2.9	7.1	2.9
Other		0.7	1.1	0.6					
Sliding fee scale		46.7	24.8	82.6	69.8	35.5	58.6	71.4	23.5
Treatment at no charge for clients									
who cannot pay		29.6	8.6	44.1	69.8	32.3	62.9	78.6	94.1
Receives public funds for substance									
abuse treatment programs		44.8	19.9	76.5	90.6	29.0	51.4	78.6	85.3

Table 2.15. Facility payment options and facilities receiving public funding, by facility operation: 2011 (continued)

Number and percent

				Facility of	peration			
		(	Outpatient only	/		Other		Dept. of
Facility payment options	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private non-profit	Private for-profit	Govern- ment <sup>1</sup>	Veterans Affairs
				Row percent	t distribution			
Type of client payments accepted								
Cash or self-payment	100.0	54.2	28.6	4.7	3.0	6.2	1.2	2.1
Private health insurance	100.0	35.5	34.0	4.9	5.7	11.7	2.3	5.9
Medicare	100.0	28.1	40.4	5.8	3.8	14.4	2.7	4.8
Medicaid	100.0	37.9	40.9	5.4	3.0	9.2	1.9	1.7
State financed health insurance	100.0	32.9	36.6	7.2	4.3	13.5	2.9	2.6
Federal military insurance	100.0	32.7	24.9	4.9	6.3	14.1	3.4	13.7
No payment accepted	100.0			50.0			16.7	33.3
Access to Recovery (ATR) vouchers <sup>2</sup>	100.0	24.7	51.9	7.8	2.6	11.7	1.3	
IHS/638 contract care funds	100.0	35.3	23.5	11.8	5.9	11.8	5.9	5.9
Other	100.0	75.0	25.0					
Sliding fee scale	100.0	27.9	50.9	7.3	2.2	8.1	2.0	1.6
Treatment at no charge for clients								
who cannot pay	100.0	15.3	42.8	11.6	3.1	13.8	3.4	10.0
Receives public funds for substance								
abuse treatment programs	100.0	23.3	49.2	9.9	1.9	7.4	2.3	6.0

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> Available only in AK, AZ, CA, CO, CT, DC, FL, HI, IA, ID, IL, IN, LA, MI, MO, MT, NJ, NM, OH, OK, RI, TN, TX, WA, WI, and WY.

<sup>- -</sup> Quantity is zero.

Table 2.16. Facility payment options and facilities receiving public funding, by treatment type: 2011

Number and percent

						Treat	ment type					
		Mainte- Detoxi- tenance nance fication deto Total only only ficati				Colun	nn percent			Row perce	ent distribu	tion
Facility payment options	Both main- Mainte- Detoxi- tenance and nance fication detoxi- Total only only fication							Both main-				Both main-
racinty payment options		Mainte-	Detoxi-	tenance and		Mainte-	Detoxi-	tenance and		Mainte-	Detoxi-	tenance and
		nance	fication	detoxi-		nance	fication	detoxi-		nance	fication	detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Total	1,081	354	63	664					100.0	32.7	5.8	61.4
Type of client payments accepted												
Cash or self-payment	1,045	338	61	646	96.7	95.5	96.8	97.3	100.0	32.3	5.8	61.8
Private health insurance	529	156	56	317	48.9	44.1	88.9	47.7	100.0	29.5	10.6	59.9
Medicare	292	98	36	158	27.0	27.7	57.1	23.8	100.0	33.6	12.3	54.1
Medicaid	699	233	49	417	64.7	65.8	77.8	62.8	100.0	33.3	7.0	59.7
State financed health insurance	347	109	36	202	32.1	30.8	57.1	30.4	100.0	31.4	10.4	58.2
Federal military insurance	205	53	30	122	19.0	15.0	47.6	18.4	100.0	25.9	14.6	59.5
No payment accepted	6	4		2	0.6	1.1		0.3	100.0	66.7		33.3
Access to Recovery (ATR) vouchers <sup>1</sup>	77	26	5	46	7.1	7.3	7.9	6.9	100.0	33.8	6.5	59.7
IHS/638 contract care funds	17	4	2	11	1.6	1.1	3.2	1.7	100.0	23.5	11.8	64.7
Other	8	1		7	0.7	0.3		1.1	100.0	12.5		87.5
Sliding fee scale	505	164	37	304	46.7	46.3	58.7	45.8	100.0	32.5	7.3	60.2
Treatment at no charge for clients												
who cannot pay	320	112	32	176	29.6	31.6	50.8	26.5	100.0	35.0	10.0	55.0
Receives public funds for substance												
abuse treatment programs	484	174	23	287	44.8	49.2	36.5	43.2	100.0	36.0	4.8	59.3

<sup>&</sup>lt;sup>1</sup>Available only in AK, AZ, CA, CO, CT, DC, FL, HI, IA, ID, IL, IN, LA, MI, MO, MT, NJ, NM, OH, OK, RI, TN, TX, WA, WI, and WY.

<sup>- -</sup> Quantity is zero.

Table 2.17. Facility smoking policy, by facility operation: 2011 Number and percent

				Facility of	operation			
Once life as madified		(	Outpatient onl	у		Other		Dept. of
Smoking policy	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
		•		Number o	of facilities			•
Number, <sup>2</sup> by facility operation  Not permitted on the property or within any	1,073	563	309	53	31	69	14	34
building	405	160	151	32	8	37	11	6
Permitted only outdoors Permitted outdoors and in designated indoor	553	341	136	16	15	23	3	19
area(s)	101	53	20	5	7	7		9
Permitted anywhere without restriction	6	4	2					
Other	8	5			1	2		
			(	Column perce	ent distributio	n		
Percent distribution, by smoking policy Not permitted on the property or within any	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
building	37.7	28.4	48.9	60.4	25.8	53.6	78.6	17.6
Permitted only outdoors Permitted outdoors and in designated indoor	51.5	60.6	44.0	30.2	48.4	33.3	21.4	55.9
area(s)	9.4	9.4	6.5	9.4	22.6	10.1		26.5
Permitted anywhere without restriction	0.6	0.7	0.6					
Other	0.7	0.9			3.2	2.9		
				Row percen	nt distribution			
Percent distribution, by facility operation Not permitted on the property or within any								
building	100.0	39.5	37.3	7.9	2.0	9.1	2.7	1.5
Permitted only outdoors Permitted outdoors and in designated indoor	100.0	61.7	24.6	2.9	2.7	4.2	0.5	3.4
area(s)	100.0	52.5	19.8	5.0	6.9	6.9		8.9
Permitted anywhere without restriction	100.0	66.7	33.3					
Other	100.0	62.5			12.5	25.0		l

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

NOTE: Percentages may not sum to 100 percent because of rounding.

<sup>&</sup>lt;sup>2</sup> Of 1,081 facilities, 8 facilities did not respond to the question. Percentages are based on the remaining 1,073 facilities.

<sup>- -</sup> Quantity is zero.

Table 2.18. Facility smoking policy, by treatment type: 2011

Number and percent

	_				1			ment type			D	( -P' (-P)	·
	_		Number o	of facilities	'		Column per	cent distrib	ution		Row perce	nt distributi	ion
Smoking policy		Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication
	Total	1,073	351	63	659	100.0	100.0	100.0	100.0	100.0	32.7	5.9	61.4
Type of facility smoking policy													
Not permitted on the property or within any													
building		405	140	33	232	37.7	39.9	52.4	35.2	100.0	34.6	8.1	57.3
Permitted only outdoors Permitted outdoors and in designated indoor		553	177	20	356	51.5	50.4	31.7	54.0	100.0	32.0	3.6	64.4
area(s)		101	32	8	61	9.4	9.1	12.7	9.3	100.0	31.7	7.9	60.4
Permitted anywhere without restriction		6	1		5	0.6	0.3		0.8	100.0	16.7		83.3
Other		8	1	2	5	0.7	0.3	3.2	0.8	100.0	12.5	25.0	62.5

<sup>&</sup>lt;sup>1</sup> Of 1,081 facilities, 8 facilities did not respond to the question. Percentages are based on the remaining 1,073 facilities.

NOTE: Percentages may not sum to 100 percent because of rounding.

<sup>- -</sup> Quantity is zero.

Table 2.19a. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011

Number and column percent

									Facility o	peration							
						of facilitie								n percen			
			O	utpatient o	only		Other				0	utpatient o	only		Other		
Clinical/therapeutic approaches		Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
	Total	1,081	568	311	53	31	70	14	34						-		
Substance abuse counseling																	
Never <sup>2</sup>		20	17	3						1.9	3.0	1.0					
Rarely		3	2				1			0.3	0.4				1.4		
Sometimes		2		1					1	0.2		0.3					2.9
Always or often		1,036	538	303	52	30	67	13	33	95.8	94.7	97.4	98.1	96.8	95.7	92.9	97.1
Not familiar with this approach		20	11	4	1	1	2	1		1.9	1.9	1.3	1.9	3.2	2.9	7.1	
12-step facilitation																	
Never <sup>2</sup>		182	98	70	9		2	1	2	16.8	17.3	22.5	17.0		2.9	7.1	5.9
Rarely		119	68	37	6		3		5	11.0	12.0	11.9	11.3		4.3		14.7
Sometimes		416	255	113	23	3	7	2	13	38.5	44.9	36.3	43.4	9.7	10.0	14.3	38.2
Always or often		355	144	90	14	27	56	10	14	32.8	25.4	28.9	26.4	87.1	80.0	71.4	41.2
Not familiar with this approach		9	3	1	1	1	2	1		0.8	0.5	0.3	1.9	3.2	2.9	7.1	
Brief intervention																	
Never <sup>2</sup>		103	70	26	1	3	1		2	9.5	12.3	8.4	1.9	9.7	1.4		5.9
Rarely		125	70	38	3	4	6		4	11.6	12.3	12.2	5.7	12.9	8.6		11.8
Sometimes		471	275	125	22	4	26	6	13	43.6	48.4	40.2	41.5	12.9	37.1	42.9	38.2
Always or often		369	148	117	27	20	34	8	15	34.1	26.1	37.6	50.9	64.5	48.6	57.1	44.1
Not familiar with this approach		13	5	5			3			1.2	0.9	1.6			4.3		
Cognitive-behavioral therapy																	
Never <sup>2</sup>		82	60	15	2	1	4			7.6	10.6	4.8	3.8	3.2	5.7		
Rarely		56	38	11	2		3		2	5.2	6.7	3.5	3.8		4.3		5.9
Sometimes		371	227	88	21	6	17	1	11	34.3	40.0	28.3	39.6	19.4	24.3	7.1	32.4
Always or often		558	234	194	28	24	45	12	21	51.6	41.2	62.4	52.8	77.4	64.3	85.7	61.8
Not familiar with this approach		14	9	3			1	1		1.3	1.6	1.0			1.4	7.1	
Contingency management/ motivational incentives																	
Never <sup>2</sup>		191	91	54	10	9	16	2	9	17.7	16.0	17.4	18.9	29.0	22.9	14.3	26.5
Rarely		178	91	50	7	7	18	1	4	16.5	16.0	16.1	13.2	22.6	25.7	7.1	11.8
Sometimes		411	222	120	20	9	17	6	17	38.0	39.1	38.6	37.7	29.0	24.3	42.9	50.0
Always or often		279	151	83	13	6	17	5	4	25.8	26.6	26.7	24.5	19.4	24.3	35.7	11.8
Not familiar with this approach		22	13	4	3		2			2.0	2.3	1.3	5.7		2.9		
Continued. See notes at end of tal	ble.		1			ı			ı	ı				ı	-		1

Table 2.19a. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011 (continued)

Number and column percent

	Facility operation															
	Number of facilities							Column percent								
		Outpatient o				Other		<u> </u>		0	utpatient o	only		Other		
Clinical/therapeutic approaches	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment 1	Dept. of Veterans Affairs
Motivational interviewing	7014.	<u> </u>			,	•		7	70101	,	•		<u> </u>	•		7
Never <sup>2</sup>	74	53	11		2	5		3	6.8	9.3	3.5		6.5	7.1		8.8
Rarely	63	49	8	3		2		1	5.8	8.6	2.6	5.7		2.9		2.9
Sometimes	375	224	98	16	12	14	3	8	34.7	39.4	31.5	30.2	38.7	20.0	21.4	23.5
Always or often	554	233	191	34	17	47	10	22	51.2	41.0	61.4	64.2	54.8	67.1	71.4	64.7
Not familiar with this approach	15	9	3			2	1		1.4	1.6	1.0			2.9	7.1	
Trauma-related counseling																
Never <sup>2</sup>	206	129	54	9	2	7	1	4	19.1	22.7	17.4	17.0	6.5	10.0	7.1	11.8
Rarely	228	142	55	10	4	12	2	3	21.1	25.0	17.7	18.9	12.9	17.1	14.3	8.8
Sometimes	492	249	147	25	19	32	3	17	45.5	43.8	47.3	47.2	61.3	45.7	21.4	50.0
Always or often	144	43	53	8	6	17	7	10	13.3	7.6	17.0	15.1	19.4	24.3	50.0	29.4
Not familiar with this approach	11	5	2	1		2	1		1.0	0.9	0.6	1.9		2.9	7.1	
Anger management																
Never <sup>2</sup>	162	97	44	10	2	6		3	15.0	17.1	14.1	18.9	6.5	8.6		8.8
Rarely	160	98	42	11	1	3	1	4	14.8	17.3	13.5	20.8	3.2	4.3	7.1	11.8
Sometimes	556	293	175	21	9	37	6	15	51.4	51.6	56.3	39.6	29.0	52.9	42.9	44.1
Always or often	197	77	50	10	18	24	6	12	18.2	13.6	16.1	18.9	58.1	34.3	42.9	35.3
Not familiar with this approach	6	3		1	1		1		0.6	0.5		1.9	3.2		7.1	
Matrix model																
Never <sup>2</sup>	393	205	121	20	7	26		14	36.4	36.1	38.9	37.7	22.6	37.1		41.2
Rarely	235	125	68	8	7	17	5	5	21.7	22.0	21.9	15.1	22.6	24.3	35.7	14.7
Sometimes	217	124	54	10	8	11	2	8	20.1	21.8	17.4	18.9	25.8	15.7	14.3	23.5
Always or often	95	47	27	7	2	4	4	4	8.8	8.3	8.7	13.2	6.5	5.7	28.6	11.8
Not familiar with this approach	141	67	41	8	7	12	3	3	13.0	11.8	13.2	15.1	22.6	17.1	21.4	8.8
Community reinforcement																
plus vouchers																
Never <sup>2</sup>	670	359	192	32	19	43	5	20	62.0	63.2	61.7	60.4	61.3	61.4	35.7	58.8
Rarely	211	113	56	10	8	12	5	7	19.5	19.9	18.0	18.9	25.8	17.1	35.7	20.6
Sometimes	87	32	33	8		7	1	6	8.0	5.6	10.6	15.1		10.0	7.1	17.6
Always or often	37	19	11	2		2	2	1	3.4	3.3	3.5	3.8		2.9	14.3	2.9
Not familiar with this approach	76	45	19	1	4	6	1		7.0	7.9	6.1	1.9	12.9	8.6	7.1	

Table 2.19a. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011 (continued)

Number and column percent

								Facility o	peration	1						
					of facilitie	_							nn percent			
		Ot	utpatient c	only		Other				O	utpatient o	only		Other		
Clinical/therapeutic approaches	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
Rational emotive behavioral therapy																
Never <sup>2</sup>	347	180	104	20	8	22		13	32.1	31.7	33.4	37.7	25.8	31.4		38.2
Rarely	305	168	86	11	10	14	3	13	28.2	29.6	27.7	20.8	32.3	20.0	21.4	38.2
Sometimes	283	153	80	15	3	20	5	7	26.2	26.9	25.7	28.3	9.7	28.6	35.7	20.6
Always or often	100	44	27	4	10	11	4		9.3	7.7	8.7	7.5	32.3	15.7	28.6	
Not familiar with this approach	46	23	14	3		3	2	1	4.3	4.0	4.5	5.7		4.3	14.3	2.9
Relapse prevention																
Never <sup>2</sup>	42	31	8	1		1		1	3.9	5.5	2.6	1.9		1.4		2.9
Rarely	10	6	3				1		0.9	1.1	1.0				7.1	
Sometimes	120	92	18	2	2	3		3	11.1	16.2	5.8	3.8	6.5	4.3		8.8
Always or often	868	417	276	49	24	62	11	29	80.3	73.4	88.7	92.5	77.4	88.6	78.6	85.3
Not familiar with this approach	41	22	6	1	5	4	2	1	3.8	3.9	1.9	1.9	16.1	5.7	14.3	2.9
Other treatment approach																
Never <sup>2</sup>	954	504	278	47	23	64	11	27	88.3	88.7	89.4	88.7	74.2	91.4	78.6	79.4
Rarely	32	23	6	1	1	1			3.0	4.0	1.9	1.9	3.2	1.4		
Sometimes	40	20	13	2	1	1		3	3.7	3.5	4.2	3.8	3.2	1.4		8.8
Always or often	55	21	14	3	6	4	3	4	5.1	3.7	4.5	5.7	19.4	5.7	21.4	11.8
Not familiar with this approach																

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> Records for which there was not a valid response are included in the category *Never*.

<sup>- -</sup> Quantity is zero.

Table 2.19b. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011

Number and row percent distribution

									Facility o	peration							
						of facilitie							Row perce	ent distribu			
			Ot	utpatient o	only		Other		<u> </u>		0	utpatient o	only		Other		
Clinical/therapeutic approaches		Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment 1	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
	Total	1,081	568	311	53	31	70	14	34	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Substance abuse counseling		,															
Never <sup>2</sup>		20	17	3						100.0	85.0	15.0					
Rarely		3	2				1			100.0	66.7				33.3		
Sometimes		2		1					1	100.0		50.0					50.0
Always or often		1,036	538	303	52	30	67	13	33	100.0	51.9	29.2	5.0	2.9	6.5	1.3	3.2
Not familiar with this approach		20	11	4	1	1	2	1		100.0	55.0	20.0	5.0	5.0	10.0	5.0	
12-step facilitation																	
Never <sup>2</sup>		182	98	70	9		2	1	2	100.0	53.8	38.5	4.9		1.1	0.5	1.1
Rarely		119	68	37	6		3		5	100.0	57.1	31.1	5.0		2.5		4.2
Sometimes		416	255	113	23	3	7	2	13	100.0	61.3	27.2	5.5	0.7	1.7	0.5	3.1
Always or often		355	144	90	14	27	56	10	14	100.0	40.6	25.4	3.9	7.6	15.8	2.8	3.9
Not familiar with this approach		9	3	1	1	1	2	1		100.0	33.3	11.1	11.1	11.1	22.2	11.1	
Brief intervention																	
Never <sup>2</sup>		103	70	26	1	3	1		2	100.0	68.0	25.2	1.0	2.9	1.0		1.9
Rarely		125	70	38	3	4	6		4	100.0	56.0	30.4	2.4	3.2	4.8		3.2
Sometimes		471	275	125	22	4	26	6	13	100.0	58.4	26.5	4.7	0.8	5.5	1.3	2.8
Always or often		369	148	117	27	20	34	8	15	100.0	40.1	31.7	7.3	5.4	9.2	2.2	4.1
Not familiar with this approach		13	5	5			3			100.0	38.5	38.5			23.1		
Cognitive-behavioral therapy																	
Never <sup>2</sup>		82	60	15	2	1	4			100.0	73.2	18.3	2.4	1.2	4.9		
Rarely		56	38	11	2		3		2	100.0	67.9	19.6	3.6		5.4		3.6
Sometimes		371	227	88	21	6	17	1	11	100.0	61.2	23.7	5.7	1.6	4.6	0.3	3.0
Always or often		558	234	194	28	24	45	12	21	100.0	41.9	34.8	5.0	4.3	8.1	2.2	3.8
Not familiar with this approach		14	9	3			1	1		100.0	64.3	21.4			7.1	7.1	
Contingency management/																	
motivational incentives																	
Never <sup>2</sup>		191	91	54	10	9	16	2	9	100.0	47.6	28.3	5.2	4.7	8.4	1.0	4.7
Rarely		178	91	50	7	7	18	1	4	100.0	51.1	28.1	3.9	3.9	10.1	0.6	2.2
Sometimes		411	222	120	20	9	17	6	17	100.0	54.0	29.2	4.9	2.2	4.1	1.5	4.1
Always or often		279	151	83	13	6	17	5	4	100.0	54.1	29.7	4.7	2.2	6.1	1.8	1.4
Not familiar with this approach		22	13	4	3		2			100.0	59.1	18.2	13.6		9.1		

Continued. See notes at end of table.

Table 2.19b. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011 (continued)

Number and row percent distribution

								Facility o	peration	1						
					of facilitie							Row perce	ent distribu			
		Ot	utpatient o	only		Other		ļ		0	utpatient o	only		Other		ļ
Clinical/therapeutic approaches	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
Motivational interviewing																
Never <sup>2</sup>	74	53	11		2	5		3	100.0	71.6	14.9		2.7	6.8		4.1
Rarely	63	49	8	3		2		1	100.0	77.8	12.7	4.8		3.2		1.6
Sometimes	375	224	98	16	12	14	3	8	100.0	59.7	26.1	4.3	3.2	3.7	0.8	2.1
Always or often	554	233	191	34	17	47	10	22	100.0	42.1	34.5	6.1	3.1	8.5	1.8	4.0
Not familiar with this approach	15	9	3			2	1		100.0	60.0	20.0			13.3	6.7	
Trauma-related counseling																
Never <sup>2</sup>	206	129	54	9	2	7	1	4	100.0	62.6	26.2	4.4	1.0	3.4	0.5	1.9
Rarely	228	142	55	10	4	12	2	3	100.0	62.3	24.1	4.4	1.8	5.3	0.9	1.3
Sometimes	492	249	147	25	19	32	3	17	100.0	50.6	29.9	5.1	3.9	6.5	0.6	3.5
Always or often	144	43	53	8	6	17	7	10	100.0	29.9	36.8	5.6	4.2	11.8	4.9	6.9
Not familiar with this approach	11	5	2	1		2	1		100.0	45.5	18.2	9.1		18.2	9.1	
Anger management																
Never <sup>2</sup>	162	97	44	10	2	6		3	100.0	59.9	27.2	6.2	1.2	3.7		1.9
Rarely	160	98	42	11	1	3	1	4	100.0	61.3	26.3	6.9	0.6	1.9	0.6	2.5
Sometimes	556	293	175	21	9	37	6	15	100.0	52.7	31.5	3.8	1.6	6.7	1.1	2.7
Always or often	197	77	50	10	18	24	6	12	100.0	39.1	25.4	5.1	9.1	12.2	3.0	6.1
Not familiar with this approach	6	3		1	1		1		100.0	50.0		16.7	16.7		16.7	
Matrix model																
Never <sup>2</sup>	393	205	121	20	7	26		14	100.0	52.2	30.8	5.1	1.8	6.6		3.6
Rarely	235	125	68	8	7	17	5	5	100.0	53.2	28.9	3.4	3.0	7.2	2.1	2.1
Sometimes	217	124	54	10	8	11	2	8	100.0	57.1	24.9	4.6	3.7	5.1	0.9	3.7
Always or often	95	47	27	7	2	4	4	4	100.0	49.5	28.4	7.4	2.1	4.2	4.2	4.2
Not familiar with this approach	141	67	41	8	7	12	3	3	100.0	47.5	29.1	5.7	5.0	8.5	2.1	2.1
Community reinforcement plus vouchers																
Never <sup>2</sup>	670	359	192	32	19	43	5	20	100.0	53.6	28.7	4.8	2.8	6.4	0.7	3.0
Rarely	211	113	56	10	8	12	5	7	100.0	53.6	26.5	4.7	3.8	5.7	2.4	3.3
Sometimes	87	32	33	8		7	1	6	100.0	36.8	37.9	9.2		8.0	1.1	6.9
Always or often	37	19	11	2		2	2	1	100.0	51.4	29.7	5.4		5.4	5.4	2.7
Not familiar with this approach	76	45	19	1	4	6	1		100.0	59.2	25.0	1.3	5.3	7.9	1.3	

Continued. See notes at end of table.

Table 2.19b. Clinical/therapeutic approaches, by frequency of use and facility operation: 2011 (continued)

Number and row percent distribution

								Facility of	peration							
				Number	of facilitie	_						Row perce	ent distribi	ution		
	<u>-</u>	0	utpatient d	only		Other				0	utpatient (	only		Other		
Clinical/therapeutic approaches	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
Rational emotive behavioral therapy																
Never <sup>2</sup>	347	180	104	20	8	22		13	100.0	51.9	30.0	5.8	2.3	6.3		3.7
Rarely	305	168	86	11	10	14	3	13	100.0	55.1	28.2	3.6	3.3	4.6	1.0	4.3
Sometimes	283	153	80	15	3	20	5	7	100.0	54.1	28.3	5.3	1.1	7.1	1.8	2.5
Always or often	100	44	27	4	10	11	4		100.0	44.0	27.0	4.0	10.0	11.0	4.0	
Not familiar with this approach	46	23	14	3		3	2	1	100.0	50.0	30.4	6.5		6.5	4.3	2.2
Relapse prevention																
Never <sup>2</sup>	42	31	8	1		1		1	100.0	73.8	19.0	2.4		2.4		2.4
Rarely	10	6	3				1		100.0	60.0	30.0				10.0	
Sometimes	120	92	18	2	2	3		3	100.0	76.7	15.0	1.7	1.7	2.5		2.5
Always or often	868	417	276	49	24	62	11	29	100.0	48.0	31.8	5.6	2.8	7.1	1.3	3.3
Not familiar with this approach	41	22	6	1	5	4	2	1	100.0	53.7	14.6	2.4	12.2	9.8	4.9	2.4
Other treatment approach																
Never <sup>2</sup>	954	504	278	47	23	64	11	27	100.0	52.8	29.1	4.9	2.4	6.7	1.2	2.8
Rarely	32	23	6	1	1	1			100.0	71.9	18.8	3.1	3.1	3.1		
Sometimes	40	20	13	2	1	1		3	100.0	50.0	32.5	5.0	2.5	2.5		7.5
Always or often	55	21	14	3	6	4	3	4	100.0	38.2	25.5	5.5	10.9	7.3	5.5	7.3
Not familiar with this approach																

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>&</sup>lt;sup>2</sup> Records for which there was not a valid response are included in the category *Never*.

<sup>- -</sup> Quantity is zero.

Table 2.20. Clinical/therapeutic approaches, by frequency of use and treatment type: 2011

Number and percent

		Numbar	of facilities				ment type		r	Poly porce	nt distrib	tion
		ivumber T	of facilitie			Colum	n percent			tow perce	nt distribu	
				Both				Both				Both
Clinical/therapeutic approaches				main-				main-				main-
		l	5	tenance		<b></b>		tenance		<b></b>		tenance
		Mainte-	Detoxi-	and		Mainte-	Detoxi-	and		Mainte-	Detoxi-	and
	Total	nance only	fication	detoxi-	Total	nance only	fication	detoxi- fication	Total	nance	fication	detoxi- fication
		<u> </u>	only	fication	TOTAL	Orlly	only	IICation		only	only	
	1,081	354	63	664					100.0	32.7	5.8	61.4
Substance abuse counseling												
Never <sup>1</sup>	20	3		17	1.9	0.8		2.6	100.0	15.0		85.0
Rarely	3	2	1		0.3	0.6	1.6		100.0	66.7	33.3	
Sometimes	2			2	0.2			0.3	100.0			100.0
Always or often	1,036	341	61	634	95.8	96.3	96.8	95.5	100.0	32.9	5.9	61.2
Not familiar with this approach	20	8	1	11	1.9	2.3	1.6	1.7	100.0	40.0	5.0	55.0
12-step facilitation												
Never <sup>1</sup>	182	60	3	119	16.8	16.9	4.8	17.9	100.0	33.0	1.6	65.4
Rarely	119	48	2	69	11.0	13.6	3.2	10.4	100.0	40.3	1.7	58.0
Sometimes	416	138	3	275	38.5	39.0	4.8	41.4	100.0	33.2	0.7	66.1
Always or often	355	103	54	198	32.8	29.1	85.7	29.8	100.0	29.0	15.2	55.8
Not familiar with this approach	9	5	1	3	0.8	1.4	1.6	0.5	100.0	55.6	11.1	33.3
Brief intervention												
Never <sup>1</sup>	103	38	5	60	9.5	10.7	7.9	9.0	100.0	36.9	4.9	58.3
Rarely	125	44	4	77	11.6	12.4	6.3	11.6	100.0	35.2	3.2	61.6
Sometimes	471	143	17	311	43.6	40.4	27.0	46.8	100.0	30.4	3.6	66.0
Always or often	369	123	37	209	34.1	34.7	58.7	31.5	100.0	33.3	10.0	56.6
Not familiar with this approach	13	6		7	1.2	1.7		1.1	100.0	46.2		53.8
Cognitive-behavioral therapy												
Never <sup>1</sup>	82	26	6	50	7.6	7.3	9.5	7.5	100.0	31.7	7.3	61.0
Rarely	56	22	4	30	5.2	6.2	6.3	4.5	100.0	39.3	7.1	53.6
Sometimes	371	117	14	240	34.3	33.1	22.2	36.1	100.0	31.5	3.8	64.7
Always or often	558	182	38	338	51.6	51.4	60.3	50.9	100.0	32.6	6.8	60.6
Not familiar with this approach	14	7	1	6	1.3	2.0	1.6	0.9	100.0	50.0	7.1	42.9
Contingency												
management/motivational incentives												
Never <sup>1</sup>	191	67	23	101	17.7	18.9	36.5	15.2	100.0	35.1	12.0	52.9
Rarely	178	58	17	103	16.5	16.4	27.0	15.5	100.0	32.6	9.6	57.9
Sometimes	411	129	8	274	38.0	36.4	12.7	41.3	100.0	31.4	1.9	66.7
Always or often	279	87	15	177	25.8	24.6	23.8	26.7	100.0	31.2	5.4	63.4
Not familiar with this approach	22	13		9	2.0	3.7		1.4	100.0	59.1		40.9
Motivational interviewing												
Never <sup>1</sup>	74	22	7	45	6.8	6.2	11.1	6.8	100.0	29.7	9.5	60.8
Rarely	63	21	2	40	5.8	5.9	3.2	6.0	100.0	33.3	3.2	63.5
Sometimes	375	125	15	235	34.7	35.3	23.8	35.4	100.0	33.3	4.0	62.7
Always or often	554	180	38	336	51.2	50.8	60.3	50.6	100.0	32.5	6.9	60.6
Not familiar with this approach	15	6	1	8	1.4	1.7	1.6	1.2	100.0	40.0	6.7	53.3
Trauma-related counseling												
Never <sup>1</sup>	206	85	8	113	19.1	24.0	12.7	17.0	100.0	41.3	3.9	54.9
Rarely	228	79	10	139	21.1	22.3	15.9	20.9	100.0	34.6	4.4	61.0
Sometimes	492	147	26	319	45.5	41.5	41.3	48.0	100.0	29.9	5.3	64.8
Always or often	144	39	18	87	13.3	11.0	28.6	13.1	100.0	27.1	12.5	60.4
Not familiar with this approach	11	4	1	6	1.0		1.6	0.9	100.0	36.4	9.1	54.5
Continued. See notes at end of table			•	•		ı			1	1		

67

Table 2.20. Clinical/therapeutic approaches, by frequency of use and treatment type: 2011 (continued)

Number and percent

						Treat	ment type					
		Number	of facilitie	s		Colum	n percent		F	Row perce	nt distribu	tion
Clinical/therapeutic approaches				Both main- tenance				Both main- tenance				Both main- tenance
	Total	Mainte- nance only	Detoxi- fication only	and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	and detoxi- fication
Anger management												
Never <sup>1</sup>	162	68	9	85	15.0	19.2	14.3	12.8	100.0	42.0	5.6	52.5
Rarely	160	52	3	105	14.8	14.7	4.8	15.8	100.0	32.5	1.9	65.6
Sometimes	556	170	29	357	51.4	48.0	46.0	53.8	100.0	30.6	5.2	64.2
Always or often	197	63	20	114	18.2	17.8	31.7	17.2	100.0	32.0	10.2	57.9
Not familiar with this approach	6	1	2	3	0.6	0.3	3.2	0.5	100.0	16.7	33.3	50.0
Matrix model												
Never <sup>1</sup>	393	153	24	216	36.4	43.2	38.1	32.5	100.0	38.9	6.1	55.0
Rarely	235	73	16	146	21.7	20.6	25.4	22.0	100.0	31.1	6.8	62.1
Sometimes	217	59	10	148	20.1	16.7	15.9	22.3	100.0	27.2	4.6	68.2
Always or often	95	20	3	72	8.8	5.6	4.8	10.8	100.0	21.1	3.2	75.8
Not familiar with this approach	141	49	10	82	13.0	13.8	15.9	12.3	100.0	34.8	7.1	58.2
Community reinforcement												
plus vouchers												
Never <sup>1</sup>	670	242	41	387	62.0	68.4	65.1	58.3	100.0	36.1	6.1	57.8
Rarely	211	55	14	142	19.5	15.5	22.2	21.4	100.0	26.1	6.6	67.3
Sometimes	87	18		69	8.0	5.1		10.4	100.0	20.7		79.3
Always or often	37	10	2	25	3.4	2.8	3.2	3.8	100.0	27.0	5.4	67.6
Not familiar with this approach	76	29	6	41	7.0	8.2	9.5	6.2	100.0	38.2	7.9	53.9
Rational emotive behavioral												
therapy												
Never <sup>1</sup>	347	127	21	199	32.1	35.9	33.3	30.0	100.0	36.6	6.1	57.3
Rarely	305	88	14	203	28.2	24.9	22.2	30.6	100.0	28.9	4.6	66.6
Sometimes	283	95	12	176	26.2	26.8	19.0	26.5	100.0	33.6	4.2	62.2
Always or often	100	28	13	59	9.3	7.9	20.6	8.9	100.0	28.0	13.0	59.0
Not familiar with this approach	46	16	3	27	4.3	4.5	4.8	4.1	100.0	34.8	6.5	58.7
Relapse prevention												
Never <sup>1</sup>	42	8	1	33	3.9	2.3	1.6	5.0	100.0	19.0	2.4	78.6
Rarely	10	2		8	0.9	0.6		1.2	100.0	20.0		80.0
Sometimes	120	28	4	88	11.1	7.9	6.3	13.3	100.0	23.3	3.3	73.3
Always or often	868	300	54	514	80.3	84.7	85.7	77.4	100.0	34.6	6.2	59.2
Not familiar with this approach	41	16	4	21	3.8	4.5	6.3	3.2	100.0	39.0	9.8	51.2
Other treatment approach												
Never <sup>1</sup>	954	316	53	585	88.3	89.3	84.1	88.1	100.0	33.1	5.6	61.3
Rarely	32	9	2	21	3.0	2.5	3.2	3.2	100.0	28.1	6.3	65.6
Sometimes	40	10	1	29	3.7	2.8	1.6	4.4	100.0	25.0	2.5	72.5
Always or often	55	19	7	29	5.1	5.4	11.1	4.4	100.0	34.5	12.7	52.7
Not familiar with this approach												

<sup>&</sup>lt;sup>1</sup> Records for which there was not a valid response are included in the category *Never*.

<sup>- -</sup> Quantity is zero.

Table 2.21. Client outreach programs, by facility operation: 2011

Number and percent

				Facility o	peration			
		C	outpatient only	/		Other		
Client outreach program	Total	Private for-profit	Private non-profit	Govern- ment 1	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
		_		Number of	facilities			
Number, by facility operation	1,081	568	311	53	31	70	14	34
Has website	892	474	255	32	30	68	12	21
Outreach to persons who may need	634	349	175	33	16	35	7	19
		-		Column	percent			
Percent, by client outreach program								
Has website	82.5	83.5	82.0	60.4	96.8	97.1	85.7	61.8
Outreach to persons who may need	58.6	61.4	56.3	62.3	51.6	50.0	50.0	55.9
			R	ow percent	distribution			
Row percent distribution, by facility operation								
Has website	100.0	53.1	28.6	3.6	3.4	7.6	1.3	2.4
Outreach to persons who may need	100.0	55.0	27.6	5.2	2.5	5.5	1.1	3.0

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.22. Client outreach programs, by treatment type: 2011

Number and percent

						Treati	ment type					
		Number	of facilitie	S		Colum	n percent			Row perce	ent distribu	tion
Client outreach program	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication		Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication
	Total 1,081	354	63	664								
Has website	892	277	61	554	82.5	78.2	96.8	83.4	100.0	31.1	6.8	62.1
Outreach to persons who may need treatment	d 634	196	28	410	58.6	55.4	44.4	61.7	100.0	30.9	4.4	64.7

Table 2.23. Medication dispensed, by facility operation: 2011 Number and percent

				Facility (	peration			
Medication dispensed		(	Outpatient onl	У		Other		Dept. of
Medication dispensed	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
		•		Number o	of facilities			•
Number, by facility operation	1,081	568	311	53	31	70	14	34
Methadone only	738	391	243	41	12	32	5	14
Buprenorphine only	29	1	2	3	7	13	3	
Both methadone and buprenorphine	305	174	65	9	11	20	6	20
Unknown	9	2	1		1	5		
			(	Column perce	ent distributio	n		
Percent distribution, by medication dispensed	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Methadone only	68.3	68.8	78.1	77.4	38.7	45.7	35.7	41.2
Buprenorphine only	2.7	0.2	0.6	5.7	22.6	18.6	21.4	
Both methadone and buprenorphine	28.2	30.6	20.9	17.0	35.5	28.6	42.9	58.8
Unknown	0.8	0.4	0.3		3.2	7.1		
				Row percen	t distribution			
Percent distribution, by facility operation	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Methadone only	100.0	53.0	32.9	5.6	1.6	4.3	0.7	1.9
Buprenorphine only	100.0	3.4	6.9	10.3	24.1	44.8	10.3	
Both methadone and buprenorphine	100.0	57.0	21.3	3.0	3.6	6.6	2.0	6.6
Unknown	100.0	22.2	11.1		11.1	55.6		

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 2.24. Medication dispensed, by treatment type: 2011 Number and percent

-						Tre	eatment typ	е				
		Number	r of facilitie	S		Column pe	rcent distrib	ution		Row per	cent distribu	tion
Medication dispensed				Both main-				Both main-				Both main-
Wedication dispensed		Mainte-	Detoxi-	tenance and		Mainte-	Detoxi-	tenance and		Mainte-	Detoxi-	tenance and
		nance	fication	detoxi-		nance	fication	detoxi-		nance	fication	detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Total	1,081	354	63	664	100.0	100.0	100.0	100.0	100.0	32.7	5.8	61.4
Methadone only	738	278	31	429	68.3	78.5	49.2	64.6	100.0	37.7	4.2	58.1
Buprenorphine only	29	8	15	6	2.7	2.3	23.8	0.9	100.0	27.6	51.7	20.7
Both methadone and buprenorphine	305	63	15	227	28.2	17.8	23.8	34.2	100.0	20.7	4.9	74.4
Unknown	9	5	2	2	0.8	1.4	3.2	0.3	100.0	55.6	22.2	22.2

Table 2.25. Formal agreement for medical referral purposes and patient record management, by facility operation: 2011

Number and percent

				Facility	operation			
- -		0	utpatient on		ĺ	Other		
Formal agreement for medical referral purposes and patient record management	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
_				Number	of facilities			
Total	1,081	568	311	53	31	70	14	34
Type of facility that OTP has a formal agreement with for medical referral								
purposes	624	275	206	25	26	56	11	25
A Federally Qualified Health Center (FQHC)	180	61	65	12	2	22	3	15
A hospital	505	210	170	20	25	50	11	19
A medical clinic	305	143	102	15	5	22	7	11
Other	34	12	12	2	2	4		2
Patient record management								
Written agreement permitting other								
providers to manage patient records	456	201	163	19	14	33	7	19
<u>-</u>				Column	percent			
Type of facility that OTP has a formal								
agreement with for medical referral								
purposes	57.7	48.4	66.2	47.2	83.9	80.0	78.6	73.5
A Federally Qualified Health Center (FQHC)	16.7	10.7	20.9	22.6	6.5	31.4	21.4	44.1
A hospital	46.7	37.0	54.7	37.7	80.6	71.4	78.6	55.9
A medical clinic	28.2	25.2	32.8	28.3	16.1	31.4	50.0	32.4
Other	3.1	2.1	3.9	3.8	6.5	5.7		5.9
Patient record management								
Written agreement permitting other								
providers to manage patient records	42.2	35.4	52.4	35.8	45.2	47.1	50.0	55.9
<u>-</u>			R	Row percei	nt distributio	on		
Type of facility that OTP has a formal								
agreement with for medical referral								
purposes	100.0	44.1	33.0	4.0	4.2	9.0	1.8	4.0
A Federally Qualified Health Center (FQHC)	100.0	33.9	36.1	6.7	1.1	12.2	1.7	8.3
A hospital	100.0	41.6	33.7	4.0	5.0	9.9	2.2	3.8
A medical clinic	100.0	46.9	33.4	4.9	1.6	7.2	2.3	3.6
Other	100.0	35.3	35.3	5.9	5.9	11.8		5.9
Patient record management								
Written agreement permitting other								
providers to manage patient records	100.0	44.1	35.7	4.2	3.1	7.2	1.5	4.2

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 2.26. Formal agreement for medical referral purposes and patient record management, by treatment type: 2011

Number and percent

						Treati	ment type					
		Number	of facilities			Colum	n percent			Row percei	nt distributi	on
Formal agreement for medical referral purposes and patient record management	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication
Total	1,081	354	63	664								
Type of facility that OTP has a formal agreement with for medical referral												
purposes	624	186	52	386	57.7	52.5	82.5	58.1	100.0	29.8	8.3	61.9
A Federally Qualified Health Center (FQHC)	180	50	14	116	16.7	14.1	22.2	17.5	100.0	27.8	7.8	64.4
A hospital	505	148	50	307	46.7	41.8	79.4	46.2	100.0	29.3	9.9	60.8
A medical clinic	305	86	15	204	28.2	24.3	23.8	30.7	100.0	28.2	4.9	66.9
Other	34	9	3	22	3.1	2.5	4.8	3.3	100.0	26.5	8.8	64.7
Patient record management												
Written agreement permitting other	450	4.40	00	004	40.0	40.4	47.0	40.0	400.0	04.4	0.0	00.0
providers to manage patient records	456	142	30	284	42.2	40.1	47.6	42.8	100.0	31.1	6.6	62.3

NOTE: Percentages may not sum to 100 percent because of rounding.

Table 2.27. Facility scheduling and plan or agreement with another provider to provide continuity of care, by facility operation: 2011

Number and percent

				Facility (	operation			
Facility schedule and plan or agreement for		C	Outpatient or	nly		Other		Dept. of
continuity of care		Private	Private	Govern-	Private	Private	Govern-	Veterans
our continuity or our c	Total	for-profit	non-profit	ment <sup>1</sup>	for-profit	non-profit	ment <sup>1</sup>	Affairs
				Number	of facilities			
Number, by facility operation	1,081	568	311	53	31	70	14	34
Scheduled operation								
Open 365 days a year	590	288	157	26	29	63	13	14
Has a plan or agreement with another provider								
to provide care if service disrupted	971	529	280	44	23	52	12	31
Continuity of care during service disruptions is provided by:								
Any plan or agreement	967	529	278	42	23	52	12	31
Hospital	264	108	78	17	13	24	9	15
Another OTP	886	510	261	37	13	32	7	26
Pharmacy	56	18	13	7	2	6	2	8
Other	41	18	14		2	6	1	
				Column	percent			
Percent, by schedule/plan	•							
Scheduled operation								
Open 365 days a year	54.6	50.7	50.5	49.1	93.5	90.0	92.9	41.2
Has a plan or agreement with another provider								
to provide care if service disrupted	89.8	93.1	90.0	83.0	74.2	74.3	85.7	91.2
Continuity of care during service disruptions is provided by:								
Any plan or agreement	89.5	93.1	89.4	79.2	74.2	74.3	85.7	91.2
Hospital	24.4	19.0	25.1	32.1	41.9	34.3	64.3	44.1
Another OTP	82.0	89.8	83.9	69.8	41.9	45.7	50.0	76.5
Pharmacy	5.2	3.2	4.2	13.2	6.5	8.6	14.3	23.5
Other	3.8	3.2	4.5		6.5	8.6	7.1	
				Row percer	t distributio	n		•
Percent distribution, by facility operation	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Scheduled operation								
Open 365 days a year	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Has a plan or agreement with another provider								
to provide care if service disrupted	100.0	54.5	28.8	4.5	2.4	5.4	1.2	3.2
Continuity of care during service disruptions is provided by:								
Any plan or agreement	100.0	54.7	28.7	4.3	2.4	5.4	1.2	3.2
Hospital	100.0	40.9	29.5	6.4	4.9	9.1	3.4	5.7
Another OTP	100.0	57.6	29.5	4.2	1.5	3.6	8.0	2.9
Pharmacy	100.0	32.1	23.2	12.5	3.6	10.7	3.6	14.3
Other	100.0	43.9	34.1		4.9	14.6	2.4	

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 2.28. Facility scheduling and plan or agreement with another provider to provide continuity of care, by treatment type: 2011

Number and percent

							Treatme	ent type					
	_		Number	of facilitie	S		Columi	n percent			Row percei	nt distribut	ion
Facility schedule and plan or agreement for continuity of care	•		Main-	Detoxi-	Both main- tenance and		Main-	Detoxi-	Both main- tenance		Main-	Detoxi-	Both main- tenance
		Total	tenance only	fication only	detox- ification	Total	tenance only	fication only	and detox- ification	Total	tenance only	fication only	and detox- ification
	Total	1,081	354	63	664								
Scheduled operation													
Open 365 days a year		590	143	62	385	54.6	40.4	98.4	58.0	100.0	24.2	10.5	65.3
Has a plan or agreement with another provider to provide care if service disrupted		971	312	41	618	89.8	88.1	65.1	93.1	100.0	32.1	4.2	63.6
Continuity of care during service disruptions is provided by:		971	312	41	010	09.0	00.1	03.1	93.1	100.0	32.1	4.2	03.0
Any plan or agreement		967	309	41	617	89.5	87.3	65.1	92.9	100.0	32.0	4.2	63.8
Hospital		264	67	27	170	24.4	18.9	42.9	25.6	100.0	25.4	10.2	64.4
Another OTP		886	282	23	581	82.0	79.7	36.5	87.5	100.0	31.8	2.6	65.6
Pharmacy		56	20	5	31	5.2	5.6	7.9	4.7	100.0	35.7	8.9	55.4
Other		41	8	3	30	3.8	2.3	4.8	4.5	100.0	19.5	7.3	73.2

Table 2.29. Average scheduled hours for counseling, by day of week and facility operation: 2011

Number and hour

				Facility of	peration			
			Outpatient onl			Other		
Day of week	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
Number of facilities that provide								
counseling, by facility operation				Number o	of facilities			
Total	1,081	568	311	53	31	70	14	34
Monday	1,061	561	305	52	28	67	14	34
Tuesday	1,055	558	304	52	28	65	14	34
Wednesday	1,059	559	306	52	28	66	14	34
Thursday	1,050	553	304	52	28	65	14	34
Friday	1,059	559	306	52	28	66	14	34
Saturday	575	319	137	20	27	56	10	6
Sunday	238	97	48	5	24	51	10	3
Number of scheduled hours for								
counseling, by facility operation				Number	of hours			
Monday	8,720	4,193	2,604	425	369	704	157	268
Tuesday	8,673	4,172	2,585	428	369	689	157	273
Wednesday	8,674	4,160	2,600	424	369	696	157	268
Thursday	8,593	4,102	2,579	425	369	695	157	266
Friday	8,541	4,125	2,528	411	369	686	152	270
Saturday	2,839	1,146	515	106	345	561	118	48
Sunday	1,574	358	193	27	317	528	118	33
Average number of scheduled hours								
for counseling, by facility operation				Average nur	nber of hours	;		
Monday	8.2	7.5	8.5	8.2	13.2	10.5	11.2	7.9
Tuesday	8.2	7.5	8.5	8.2	13.2	10.6	11.2	8.0
Wednesday	8.2	7.4	8.5	8.2	13.2	10.5	11.2	7.9
Thursday	8.2	7.4	8.5	8.2	13.2	10.7	11.2	7.8
Friday	8.1	7.4	8.3	7.9	13.2	10.4	10.9	7.9
Saturday	4.9	3.6	3.8	5.3	12.8	10.0	11.8	8.0
Sunday	6.6	3.7	4.0	5.4	13.2	10.4	11.8	11.0

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.30. Average scheduled hours for counseling, by treatment type and day of week: 2011 Number and hour

To a toward toward					Day of week			
Treatment type	Total	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Number of facilities that provide counseling,								
by day of week				Numbe	r of facilities			
Maintainance-only services	354	345	343	345	342	345	181	55
Detoxification-only services	63	58	58	58	58	58	55	54
Both maintenance and detoxification services	664	658	654	656	650	656	339	129
Total	1,081	1061	1055	1059	1050	1059	575	238
Number of scheduled hours for counseling,								
by day of week				Numb	er of hours			
Maintainance-only services	14,214	2,676	2,644	2,663	2,631	2,621	723	256
Detoxification-only services	4,799	698	698	702	701	698	655	647
Both maintenance and detoxification services	28,601	5,346	5,331	5,309	5,261	5,222	1,461	671
Total	47,614	8,720	8,673	8,674	8,593	8,541	2,839	1,574
Average number of scheduled hours for								
counseling, by day of week				Average n	umber of hours			
Maintainance-only services	40.2	7.8	7.7	7.7	7.7	7.6	4.0	4.7
Detoxification-only services	76.2	12.0	12.0	12.1	12.1	12.0	11.9	12.0
Both maintenance and detoxification services	43.1	8.1	8.2	8.1	8.1	8.0	4.3	5.2
Average	44.0	8.2	8.2	8.2	8.2	8.1	4.9	6.6

Table 2.31. Average scheduled hours for dispensing medication, by day of week and facility operation: 2011

Number and hour

				Fa	acility operati	ion		
		(	Outpatient only	У		Other		Dept. of
Day of week		Private	Private	Govern-	Private	Private	Govern-	Veterans
	Total	for-profit	non-profit	ment 1	for-profit	non-profit	ment 1	Affairs
Number of facilities that dispense					•			•
medications, by facility operation				Number o	of facilities			
Total	1,081	568	311	53	31	70	14	34
Monday	1,065	565	307	52	28	65	14	34
Tuesday	1,064	564	308	52	28	64	14	34
Wednesday	1,062	564	306	52	28	64	14	34
Thursday	1,063	564	307	52	28	64	14	34
Friday	1,063	564	307	52	28	64	14	34
Saturday	1,036	555	300	48	27	64	14	28
Sunday	586	281	173	24	25	56	14	13
Number of hours scheduled to dispense								
medications, by facility operation				Number	of hours			
Monday	7,413	3,481	1,910	323	437	872	197	193
Tuesday	7,348	3,444	1,898	320	436	859	197	194
Wednesday	7,330	3,432	1,898	316	436	860	197	191
Thursday	7,327	3,417	1,899	323	436	863	197	192
Friday	7,359	3,440	1,912	322	436	863	197	189
Saturday	4,535	1,759	1,023	205	428	831	190	99
Sunday	2,895	794	547	107	423	777	188	59
Average number of hours scheduled to		,			•			•
dispense medications, by facility operation				Average nun	nber of hours	:		
Monday	7.0	6.2	6.2	6.2	15.6	13.4	14.1	5.7
Tuesday	6.9	6.1	6.2	6.2	15.6	13.4	14.1	5.7
Wednesday	6.9	6.1	6.2	6.1	15.6	13.4	14.1	5.6
Thursday	6.9	6.1	6.2	6.2	15.6	13.5	14.1	5.6
Friday	6.9	6.1	6.2	6.2	15.6	13.5	14.1	5.6
Saturday	4.4	3.2	3.4	4.3	15.9	13.0	13.6	3.5
Sunday	4.9	2.8	3.2	4.5	16.9	13.9	13.4	4.5

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.32. Average scheduled hours for dispensing medication, by treatment type and day of week: 2011

Number and hour

Transfers and to us a					Day of week			
Treatment type	Total	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Number of facilities that dispense medication,								
by day of week				Numbe	r of facilities			
Maintainance-only services	354	349	350	348	349	349	333	152
Detoxification-only services	63	57	57	57	57	57	57	56
Both maintenance and detoxification services	664	659	657	657	657	657	646	378
Total	1,081	1065	1064	1062	1063	1063	1036	586
Number of hours scheduled for dispensing								
medication, by day of week				Numb	er of hours			
Maintainance-only services	12,467	2,151	2,143	2,135	2,134	2,144	1,197	563
Detoxification-only services	6,641	957	957	957	955	957	941	917
Both maintenance and detoxification services	25,099	4,305	4,248	4,238	4,238	4,258	2,397	1,415
Total	44,207	7,413	7,348	7,330	7,327	7,359	4,535	2,895
Average number of hours for dispensing								
medication, by day of week				Average n	umber of hours			
Maintainance-only services	35.2	6.2	6.1	6.1	6.1	6.1	3.6	3.7
Detoxification-only services	105.4	16.8	16.8	16.8	16.8	16.8	16.5	16.4
Both maintenance and detoxification services	37.8	6.5	6.5	6.5	6.5	6.5	3.7	3.7
Average	40.9	7.0	6.9	6.9	6.9	6.9	4.4	4.9

Table 2.33. Vaccinations, screenings for medical conditions, diagnostic tests, and routine drug testing, by facility operation: 2011

Number and column percent

								Facil	ity oper	ation						
				Number	of facilitie	s						Colum	n percen	t .		
Vaccinations, screenings for medical conditions,		Οι	ıtpatient d	only		Other		Dept. of		Οι	ıtpatient d	only		Other		Dept. of
diagnostic tests, and routine drug testing	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment 1	Veter- ans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment 1	Veter- ans Affairs
Total	1,081	568	311	53	31	70	14	34	Tulai	pront	prom	mon	pront	pront	mont	Allalis
Providing vaccinations	440	145	171	32	12	37	12	31	40.7	25.5	55.0	60.4	38.7	52.9	85.7	91.2
Hepatitis B	343	113	136	27	6	25	9	27	31.7	19.9	43.7	50.9	19.4	35.7	64.3	79.4
Influenza	338	102	123	26	10	34	12	31	31.3	18.0	39.5	49.1	32.3	48.6	85.7	91.2
Routine screenings for medical																
conditions	1,072	563	308	53	31	69	14	34	99.2	99.1	99.0	100.0	100.0	98.6	100.0	100.0
Diabetes	507	182	172	32	27	52	13	29	46.9	32.0	55.3	60.4	87.1	74.3	92.9	85.3
Hepatitis C	704	303	235	38	23	57	14	34	65.1	53.3	75.6	71.7	74.2	81.4	100.0	100.0
HIV/AIDS	644	269	222	40	20	50	13	30	59.6	47.4	71.4	75.5	64.5	71.4	92.9	88.2
Hypertension (high blood pressure)	877	421	269	48	31	61	13	34	81.1	74.1	86.5	90.6	100.0	87.1	92.9	100.0
Pregnancy	983	529	266	47	31	65	13	32	90.9	93.1	85.5	88.7	100.0	92.9	92.9	94.1
Heartbeat abnormalities	768	365	232	39	30	61	11	30	71.0	64.3	74.6	73.6	96.8	87.1	78.6	88.2
Sexually transmitted infections (STIs)	890	457	254	48	29	58	13	31	82.3	80.5	81.7	90.6	93.5	82.9	92.9	91.2
Sleep apnea	172	65	49	6	14	20	7	11	15.9	11.4	15.8	11.3	45.2	28.6	50.0	32.4
Alcohol use	963	481	292	44	31	68	13	34	89.1	84.7	93.9	83.0	100.0	97.1	92.9	100.0
Tobacco use	801	370	255	38	26	64	14	34	74.1	65.1	82.0	71.7	83.9	91.4	100.0	100.0
Diagnostic tests for medical conditions	964	491	282	52	29	63	14	33	89.2	86.4	90.7	98.1	93.5	90.0	100.0	97.1
Diabetes	291	83	93	20	21	37	11	26	26.9	14.6	29.9	37.7	67.7	52.9	78.6	76.5
Hepatitis C	420	155	144	28	14	37	13	29	38.9	27.3	46.3	52.8	45.2	52.9	92.9	85.3
HIV/AIDS	440	140	170	33	14	43	12	28	40.7	24.6	54.7	62.3	45.2	61.4	85.7	82.4
Hypertension (high blood pressure)	520	226	157	34	20	46	10	27	48.1	39.8	50.5	64.2	64.5	65.7	71.4	79.4
Pregnancy	766	398	212	39	22	55	13	27	70.9	70.1	68.2	73.6	71.0	78.6	92.9	79.4
Heartbeat abnormalities	365	131	116	24	16	42	9	27	33.8	23.1	37.3	45.3	51.6	60.0	64.3	79.4
Sexually transmitted infections (STIs)	612	312	171	30	20	39	12	28	56.6	54.9	55.0	56.6	64.5	55.7	85.7	82.4
Sleep apnea	37	3	8	1	2	7	3	13	3.4	0.5	2.6	1.9	6.5	10.0	21.4	38.2
Alcohol use	737	340	226	39	27	59	14	32	68.2	59.9	72.7	73.6	87.1	84.3	100.0	94.1
Tobacco use	167	56	45	14	7	19	9	17	15.4	9.9	14.5	26.4	22.6	27.1	64.3	50.0
Routine drug testing	1,070	566	306	53	30	68	13	34	99.0	99.6	98.4	100.0	96.8	97.1	92.9	100.0
Marijuana	788	392	218	45	30	60	12	31	72.9	69.0	70.1	84.9	96.8	85.7	85.7	91.2
Cocaine	1,055	559	302	53	30	64	13	34	97.6	98.4	97.1	100.0	96.8	91.4	92.9	100.0
Benzodiazepines	1,041	544	300	53	30	67	13	34	96.3	95.8	96.5	100.0	96.8	95.7	92.9	100.0
Heroin	1,047	548	304	51	29	68	13	34	96.9	96.5	97.7	96.2	93.5	97.1	92.9	100.0
Prescription opioids	1,029	560	281	51	30	64	10	33	95.2	98.6	90.4	96.2	96.8	91.4	71.4	97.1
Methamphetamines	894	489	229	50	28	56	11	31	82.7	86.1	73.6	94.3	90.3	80.0	78.6	91.2
Other stimulants	258	160	62	14	4	9	3	6	23.9	28.2	19.9	26.4	12.9	12.9	21.4	17.6

Continued. See notes at end of table.

Table 2.33. Vaccinations, screenings for medical conditions, diagnostic tests, and routine drug testing, by facility operation: 2011 (continued)

Number and row percent distribution

				Number		P	iii uisti ii		ity oper	ation						
				Number	of facilitie	S						Row perce	ent distribi	ution		
Vaccinations, screenings for medical conditions,		Οι	utpatient o	only		Other		Dept. of		Οι	ıtpatient (	only		Other		Dept. of
diagnostic tests, and routine drug testing	Total	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Veter- ans Affairs	Total	Private for- profit	Private non- profit	Govern- ment 1	Private for- profit	Private non- profit	Govern- ment <sup>1</sup>	Veter- ans Affairs
Total	1,081	568	311	53	31	70	14	34	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Providing vaccinations	440	145	171	32	12	37	12	31	100.0	33.0	38.9	7.3	2.7	8.4	2.7	7.0
Hepatitis B	343	113	136	27	6	25	9	27	100.0	32.9	39.7	7.9	1.7	7.3	2.6	7.9
Influenza	338	102	123	26	10	34	12	31	100.0	30.2	36.4	7.7	3.0	10.1	3.6	9.2
Routine screenings for medical																
conditions	1,072	563	308	53	31	69	14	34	100.0	52.5	28.7	4.9	2.9	6.4	1.3	3.2
Diabetes	507	182	172	32	27	52	13	29	100.0	35.9	33.9	6.3	5.3	10.3	2.6	5.7
Hepatitis C	704	303	235	38	23	57	14	34	100.0	43.0	33.4	5.4	3.3	8.1	2.0	4.8
HIV/AIDS	644	269	222	40	20	50	13	30	100.0	41.8	34.5	6.2	3.1	7.8	2.0	4.7
Hypertension (high blood pressure)	877	421	269	48	31	61	13	34	100.0	48.0	30.7	5.5	3.5	7.0	1.5	3.9
Pregnancy	983	529	266	47	31	65	13	32	100.0	53.8	27.1	4.8	3.2	6.6	1.3	3.3
Heartbeat abnormalities	768	365	232	39	30	61	11	30	100.0	47.5	30.2	5.1	3.9	7.9	1.4	3.9
Sexually transmitted infections (STIs)	890	457	254	48	29	58	13	31	100.0	51.3	28.5	5.4	3.3	6.5	1.5	3.5
Sleep apnea	172	65	49	6	14	20	7	11	100.0	37.8	28.5	3.5	8.1	11.6	4.1	6.4
Alcohol use	963	481	292	44	31	68	13	34	100.0	49.9	30.3	4.6	3.2	7.1	1.3	3.5
Tobacco use	801	370	255	38	26	64	14	34	100.0	46.2	31.8	4.7	3.2	8.0	1.7	4.2
Diagnostic tests for medical conditions	964	491	282	52	29	63	14	33	100.0	50.9	29.3	5.4	3.0	6.5	1.5	3.4
Diabetes	291	83	93	20	21	37	11	26	100.0	28.5	32.0	6.9	7.2	12.7	3.8	8.9
Hepatitis C	420	155	144	28	14	37	13	29	100.0	36.9	34.3	6.7	3.3	8.8	3.1	6.9
HIV/AIDS	440	140	170	33	14	43	12	28	100.0	31.8	38.6	7.5	3.2	9.8	2.7	6.4
Hypertension (high blood pressure)	520	226	157	34	20	46	10	27	100.0	43.5	30.2	6.5	3.8	8.8	1.9	5.2
Pregnancy	766	398	212	39	22	55	13	27	100.0	52.0	27.7	5.1	2.9	7.2	1.7	3.5
Heartbeat abnormalities	365	131	116	24	16	42	9	27	100.0	35.9	31.8	6.6	4.4	11.5	2.5	7.4
Sexually transmitted infections (STIs)	612	312	171	30	20	39	12	28	100.0	51.0	27.9	4.9	3.3	6.4	2.0	4.6
Sleep apnea	37	3	8	1	2	7	3	13	100.0	8.1	21.6	2.7	5.4	18.9	8.1	35.1
Alcohol use	737	340	226	39	27	59	14	32	100.0	46.1	30.7	5.3	3.7	8.0	1.9	4.3
Tobacco use	167	56	45	14	7	19	9	17	100.0	33.5	26.9	8.4	4.2	11.4	5.4	10.2
Routine drug testing	1,070	566	306	53	30	68	13	34	100.0	52.9	28.6	5.0	2.8	6.4	1.2	3.2
Marijuana	788	392	218	45	30	60	12	31	100.0	49.7	27.7	5.7	3.8	7.6	1.5	3.9
Cocaine	1,055	559	302	53	30	64	13	34	100.0	53.0	28.6	5.0	2.8	6.1	1.2	3.2
Benzodiazepines	1,041	544	300	53	30	67	13	34	100.0	52.3	28.8	5.1	2.9	6.4	1.2	3.3
Heroin	1,047	548	304	51	29	68	13	34	100.0	52.3	29.0	4.9	2.8	6.5	1.2	3.2
Prescription opioids	1,029	560	281	51	30	64	10	33	100.0	54.4	27.3	5.0	2.9	6.2	1.0	3.2
Methamphetamines	894	489	229	50	28	56	11	31	100.0	54.7	25.6	5.6	3.1	6.3	1.2	3.5
Other stimulants	258	160	62	14	4	9	3	6	100.0	62.0	24.0	5.4	1.6	3.5	1.2	2.3

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.34. Vaccinations, screenings for medical conditions, diagnostic tests, and routine drug testing, by treatment type: 2011

Number and percent

							T	reatment typ	ре				
	_		Number	of facilities			Colun	nn percent			Row perce	ent distribu	tion
Vaccinations, routine screenings for medical conditions, diagnostic tests, and routine drug test	sting	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication
	Total	1,081	354	63	664					100.0	32.7	5.8	61.4
Providing vaccinations		440	157	37	246	40.7	44.4	58.7	37.0	100.0	35.7	8.4	55.9
Hepatitis B		343	118	24	201	31.7	33.3	38.1	30.3	100.0	34.4	7.0	58.6
Influenza		338	117	34	187	31.3	33.1	54.0	28.2	100.0	34.6	10.1	55.3
Routine screenings for medical conditions		1,072	351	62	659	99.2	99.2	98.4	99.2	100.0	32.7	5.8	61.5
Diabetes		507	162	50	295	46.9	45.8	79.4	44.4	100.0	32.0	9.9	58.2
Hepatitis C		704	224	51	429	65.1	63.3	81.0	64.6	100.0	31.8	7.2	60.9
HIV/AIDS		644	201	48	395	59.6	56.8	76.2	59.5	100.0	31.2	7.5	61.3
Hypertension (high blood pressure)		877	290	59	528	81.1	81.9	93.7	79.5	100.0	33.1	6.7	60.2
Pregnancy		983	308	61	614	90.9	87.0	96.8	92.5	100.0	31.3	6.2	62.5
Heartbeat abnormalities		768	243	54	471	71.0	68.6	85.7	70.9	100.0	31.6	7.0	61.3
Sexually transmitted infections (STIs)		890	281	54	555	82.3	79.4	85.7	83.6	100.0	31.6	6.1	62.4
Sleep apnea		172	43	24	105	15.9	12.1	38.1	15.8	100.0	25.0	14.0	61.0
Alcohol use		963	310	61	592	89.1	87.6	96.8	89.2	100.0	32.2	6.3	61.5
Tobacco use		801	263	56	482	74.1	74.3	88.9	72.6	100.0	32.8	7.0	60.2
Diagnostic tests for medical conditions		964	312	61	591	89.2	88.1	96.8	89.0	100.0	32.4	6.3	61.3
Diabetes		291	93	45	153	26.9	26.3	71.4	23.0	100.0	32.0	15.5	52.6
Hepatitis C		420	129	38	253	38.9	36.4	60.3	38.1	100.0	30.7	9.0	60.2
HIV/AIDS		440	136	42	262	40.7	38.4	66.7	39.5	100.0	30.9	9.5	59.5
Hypertension (high blood pressure)		520	151	48	321	48.1	42.7	76.2	48.3	100.0	29.0	9.2	61.7
Pregnancy		766	220	57	489	70.9	62.1	90.5	73.6	100.0	28.7	7.4	63.8
Heartbeat abnormalities		365	116	40	209	33.8	32.8	63.5	31.5	100.0	31.8	11.0	57.3
Sexually transmitted infections (STIs)		612	178	43	391	56.6	50.3	68.3	58.9	100.0	29.1	7.0	63.9
Sleep apnea		37	8	8	21	3.4	2.3	12.7	3.2	100.0	21.6	21.6	56.8
Alcohol use		737	229	57	451	68.2	64.7	90.5	67.9	100.0	31.1	7.7	61.2
Tobacco use		167	56	21	90	15.4	15.8	33.3	13.6	100.0	33.5	12.6	53.9
Routine drug testing		1,070	352	61	657	99.0	99.4	96.8	98.9	100.0	32.9	5.7	61.4
Marijuana		788	260	52	476	72.9	73.4	82.5	71.7	100.0	33.0	6.6	60.4
Cocaine		1,055	344	58	653	97.6	97.2	92.1	98.3	100.0	32.6	5.5	61.9
Benzodiazepines		1,041	344	56	641	96.3	97.2	88.9	96.5	100.0	33.0	5.4	61.6
Heroin		1,047	344	60	643	96.9	97.2	95.2	96.8	100.0	32.9	5.7	61.4
Prescription opioids		1,029	328	58	643	95.2	92.7	92.1	96.8	100.0	31.9	5.6	62.5
Methamphetamines		894	285	53	556	82.7	80.5	84.1	83.7	100.0	31.9	5.9	62.2
Other stimulants		258	91	6	161	23.9	25.7	9.5	24.2	100.0	35.3	2.3	62.4

Table 2.35. Routine screenings for and treatment involving medication or counseling therapy for psychiatric conditions, by facility operation: 2011

Number and column percent

								Fac	ility opera	ation						
				Nu	mber							Columi	n percent			
Psychiatric conditions		Οι	ıtpatient (	only		Other		Dept. of		Οι	ıtpatient (	only		Other		Dept. of
		Private	Private	Govern-	Private	Private	Govern-	Veter-		Private	Private	Govern-	Private	Private	Govern-	Veter-
	Total	for- profit	non- profit	ment <sup>1</sup>	for- profit	non- profit	ment <sup>1</sup>	ans Affairs	Total	for- profit	non- profit	ment <sup>1</sup>	for- profit	non- profit	ment <sup>1</sup>	ans Affairs
	1,081	568	311	53	31	70	14	34		<u> </u>	•		,	,		
Routine screenings for	868	410	271	48	28	64	13	34	80.3	72.2	87.1	90.6	90.3	91.4	92.9	100.0
Anxiety/panic disorder	781	353	254	41	27	61	13	32	72.2	62.1	81.7	77.4	87.1	87.1	92.9	94.1
Bipolar disorder	706	295	238	42	26	60	13	32	65.3	51.9	76.5	79.2	83.9	85.7	92.9	94.1
Depression	841	393	264	46	28	63	13	34	77.8	69.2	84.9	86.8	90.3	90.0	92.9	100.0
PTSD	710	309	228	42	25	59	13	34	65.7	54.4	73.3	79.2	80.6	84.3	92.9	100.0
Schizophrenia	646	248	229	40	26	58	13	32	59.8	43.7	73.6	75.5	83.9	82.9	92.9	94.1
Other psychiatric conditions	151	42	58	10	5	18	7	11	14.0	7.4	18.6	18.9	16.1	25.7	50.0	32.4
Treatment involving medication	421	80	172	35	28	59	13	34	38.9	14.1	55.3	66.0	90.3	84.3	92.9	100.0
Anxiety/panic disorder	382	58	162	31	28	56	13	34	35.3	10.2	52.1	58.5	90.3	80.0	92.9	100.0
Bipolar disorder	326	31	137	31	26	56	13	32	30.2	5.5	44.1	58.5	83.9	80.0	92.9	94.1
Depression	377	58	156	29	28	59	13	34	34.9	10.2	50.2	54.7	90.3	84.3	92.9	100.0
PTSD	316	37	131	24	22	56	13	33	29.2	6.5	42.1	45.3	71.0	80.0	92.9	97.1
Schizophrenia	280	28	112	22	24	50	12	32	25.9	4.9	36.0	41.5	77.4	71.4	85.7	94.1
Other psychiatric conditions	83	5	37	4	5	16	5	11	7.7	0.9	11.9	7.5	16.1	22.9	35.7	32.4
Treatment involving counseling	662	279	220	40	26	54	11	32	61.2	49.1	70.7	75.5	83.9	77.1	78.6	94.1
Anxiety/panic disorder	598	246	203	37	25	46	10	31	55.3	43.3	65.3	69.8	80.6	65.7	71.4	91.2
Bipolar disorder	508	184	186	32	21	46	10	29	47.0	32.4	59.8	60.4	67.7	65.7	71.4	85.3
Depression	602	241	206	37	25	50	11	32	55.7	42.4	66.2	69.8	80.6	71.4	78.6	94.1
PTSD	528	196	191	31	22	48	11	29	48.8	34.5	61.4	58.5	71.0	68.6	78.6	85.3
Schizophrenia	363	104	139	25	21	39	8	27	33.6	18.3	44.7	47.2	67.7	55.7	57.1	79.4
Other psychiatric conditions	126	36	47	6	7	15	5	10	11.7	6.3	15.1	11.3	22.6	21.4	35.7	29.4

Continued. See notes at end of table.

Table 2.35. Routine screenings for and treatment involving medication or counseling therapy for psychiatric conditions, by facility operation: 2011 (continued)

Number and row percent distribution

								Fac	ility opera	ation						
				Number	of facilitie	s					F	Row perce	nt distribu	tion		
Psychiatric conditions		Οι	utpatient o	only		Other		Dept. of		Οι	ıtpatient d	only		Other		Dept. of
		Private	Private	_	Private	Private	_	Veter-		Private	Private	_	Private	Private	_	Veter-
		for-	non-	Govern-	for-	non-	Govern-	ans		for-	non-	Govern-	for-	non-	Govern-	ans
	Total	profit	profit	ment '	profit	profit	ment '	Affairs	Total	profit	profit	ment 1	profit	profit	ment '	Affairs
	1,081	568	311	53	31	70	14	34	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Routine screenings for	868	410	271	48	28	64	13	34	100.0	47.2	31.2	5.5	3.2	7.4	1.5	3.9
Anxiety/panic disorder	781	353	254	41	27	61	13	32	100.0	45.2	32.5	5.2	3.5	7.8	1.7	4.1
Bipolar disorder	706	295	238	42	26	60	13	32	100.0	41.8	33.7	5.9	3.7	8.5	1.8	4.5
Depression	841	393	264	46	28	63	13	34	100.0	46.7	31.4	5.5	3.3	7.5	1.5	4.0
PTSD	710	309	228	42	25	59	13	34	100.0	43.5	32.1	5.9	3.5	8.3	1.8	4.8
Schizophrenia	646	248	229	40	26	58	13	32	100.0	38.4	35.4	6.2	4.0	9.0	2.0	5.0
Other psychiatric conditions	151	42	58	10	5	18	7	11	100.0	27.8	38.4	6.6	3.3	11.9	4.6	7.3
Treatment involving medication	421	80	172	35	28	59	13	34	100.0	19.0	40.9	8.3	6.7	14.0	3.1	8.1
Anxiety/panic disorder	382	58	162	31	28	56	13	34	100.0	15.2	42.4	8.1	7.3	14.7	3.4	8.9
Bipolar disorder	326	31	137	31	26	56	13	32	100.0	9.5	42.0	9.5	8.0	17.2	4.0	9.8
Depression	377	58	156	29	28	59	13	34	100.0	15.4	41.4	7.7	7.4	15.6	3.4	9.0
PTSD	316	37	131	24	22	56	13	33	100.0	11.7	41.5	7.6	7.0	17.7	4.1	10.4
Schizophrenia	280	28	112	22	24	50	12	32	100.0	10.0	40.0	7.9	8.6	17.9	4.3	11.4
Other psychiatric conditions	83	5	37	4	5	16	5	11	100.0	6.0	44.6	4.8	6.0	19.3	6.0	13.3
Treatment involving counseling	662	279	220	40	26	54	11	32	100.0	42.1	33.2	6.0	3.9	8.2	1.7	4.8
Anxiety/panic disorder	598	246	203	37	25	46	10	31	100.0	41.1	33.9	6.2	4.2	7.7	1.7	5.2
Bipolar disorder	508	184	186	32	21	46	10	29	100.0	36.2	36.6	6.3	4.1	9.1	2.0	5.7
Depression	602	241	206	37	25	50	11	32	100.0	40.0	34.2	6.1	4.2	8.3	1.8	5.3
PTSD	528	196	191	31	22	48	11	29	100.0	37.1	36.2	5.9	4.2	9.1	2.1	5.5
Schizophrenia	363	104	139	25	21	39	8	27	100.0	28.7	38.3	6.9	5.8	10.7	2.2	7.4
Other psychiatric conditions	126	36	47	6	7	15	5	10	100.0	28.6	37.3	4.8	5.6	11.9	4.0	7.9

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.36. Routine screenings for and treatment involving medication or counseling therapy for psychiatric conditions, by treatment type: 2011

Number and percent

						Treatme	ent type					
		Number o	of facilities			Column	percent			Row percer	nt distributi	on
Psychiatric conditions	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main tenance and detoxi- fication
Tota	ıl 1,081	354	63	664		,				<u> </u>		
Routine screenings for	868	281	56	531	80.3	79.4	88.9	80.0	100.0	32.4	6.5	61.2
Anxiety/panic disorder	781	253	53	475	72.2	71.5	84.1	71.5	100.0	32.4	6.8	60.8
Bipolar disorder	706	222	53	431	65.3	62.7	84.1	64.9	100.0	31.4	7.5	61.0
Depression	841	273	56	512	77.8	77.1	88.9	77.1	100.0	32.5	6.7	60.9
PTSD	710	219	53	438	65.7	61.9	84.1	66.0	100.0	30.8	7.5	61.7
Schizophrenia	646	210	53	383	59.8	59.3	84.1	57.7	100.0	32.5	8.2	59.3
Other psychiatric conditions	151	40	19	92	14.0	11.3	30.2	13.9	100.0	26.5	12.6	60.9
Treatment involving medication	421	140	55	226	38.9	39.5	87.3	34.0	100.0	33.3	13.1	53.7
Anxiety/panic disorder	382	131	54	197	35.3	37.0	85.7	29.7	100.0	34.3	14.1	51.6
Bipolar disorder	326	101	52	173	30.2	28.5	82.5	26.1	100.0	31.0	16.0	53.1
Depression	377	124	55	198	34.9	35.0	87.3	29.8	100.0	32.9	14.6	52.5
PTSD	316	94	50	172	29.2	26.6	79.4	25.9	100.0	29.7	15.8	54.4
Schizophrenia	280	87	48	145	25.9	24.6	76.2	21.8	100.0	31.1	17.1	51.8
Other psychiatric conditions	83	21	15	47	7.7	5.9	23.8	7.1	100.0	25.3	18.1	56.6
Treatment involving counseling	662	210	47	405	61.2	59.3	74.6	61.0	100.0	31.7	7.1	61.2
Anxiety/panic disorder	598	189	45	364	55.3	53.4	71.4	54.8	100.0	31.6	7.5	60.9
Bipolar disorder	508	159	43	306	47.0	44.9	68.3	46.1	100.0	31.3	8.5	60.2
Depression	602	191	47	364	55.7	54.0	74.6	54.8	100.0	31.7	7.8	60.5
PTSD	528	159	45	324	48.8	44.9	71.4	48.8	100.0	30.1	8.5	61.4
Schizophrenia	363	115	39	209	33.6	32.5	61.9	31.5	100.0	31.7	10.7	57.6
Other psychiatric conditions	126	31	18	77	11.7	8.8	28.6	11.6	100.0	24.6	14.3	61.1

Table 2.37. Clinical staff employed and average hours worked in a week, by facility operation: 2011

Number and hour

						Facility	operation					
								Outpatient or	าly			
Clinical staff and working hours	1	Total		Pr	ivate for-pr	ofit	Pi	rivate non-pro	ofit		Government	1
Olimbal stall and working hours	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff
Clinical staff employed, by facility operation												
Physicians (MD, DO, Psychiatrist, etc.)	1,051	1,749	1.7	545	718	1.3	309	575	1.9	53	108	2.0
Registered nurses (RN)	1,048	2,285	2.2	541	395	0.7	309	590	1.9	53	161	3.0
Licensed practical nurses (LPN)	1,049	2,816	2.7	544	1,530	2.8	309	713	2.3	52	98	1.9
Mid-level medical personnel (Nurse Practitioner, PA,												
APRN, etc.)	1,045	611	0.6	541	245	0.5	308	174	0.6	52	30	0.6
Pharmacists	1,046	425	0.4	540	224	0.4	308	84	0.3	53	8	0.2
Doctoral level counselors (Psychologist, etc.)	1,040	208	0.2	538	66	0.1	306	64	0.2	52	18	0.3
Masters level counselors (MSW, etc.)	1,047	2,899	2.8	544	1,211	2.2	307	1,048	3.4	52	158	3.0
Other degreed counselors (BA, BS)	1,032	3,291	3.2	540	1,681	3.1	303	998	3.3	51	165	3.2
Associate or non-degreed counselors	1,019	1,858	1.8	530	806	1.5	300	596	2.0	50	99	2.0
			Average			Average			Average			Average
	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours
Hours worked in a week, by facility operation												
Physicians (MD, DO, Psychiatrist, etc.)	1,749	24,757	14.2	718	7,960	11.1	575	7,425	12.9	108	1,866	17.3
Registered nurses (RN)	2,285	56,991	24.9	395	9,346	23.7	590	14,566	24.7	161	4,664	29.0
Licensed practical nurses (LPN)	2,816	76,191	27.1	1,530	41,072	26.8	713	19,684	27.6	98	2,568	26.2
Mid-level medical personnel (Nurse Practitioner, PA,												
APRN, etc.)	611	12,779	20.9	245	4,383	17.9	174	3,893	22.4	30	912	30.4
Pharmacists	425	4,639	10.9	224	1,290	5.8	84	689	8.2	8	131	16.4
Doctoral level counselors (Psychologist, etc.)	208	4,918	23.6	66	1,360	20.6	64	1,433	22.4	18	377	20.9
Masters level counselors (MSW, etc.)	2,899	93,102	32.1	1,211	38,442	31.7	1,048	34,705	33.1	158	5,702	36.1
Other degreed counselors (BA, BS)	3,291	103,878	31.6	1,681	53,225	31.7	998	31,266	31.3	165	5,286	32.0
Associate or non-degreed counselors	1,858	56,622	30.5	806	25,420	31.5	596	18,605	31.2	99	2,552	25.8

Continued. See notes at end of table.

Table 2.37. Clinical staff employed and average hours worked in a week, by facility operation: 2011 (continued)

Number and hour

						Facility	operation					
				С	ther facilitie	es						
Clinical staff and working hours	F	Private for-pro	fit	Pri	ivate non-pi	ofit		Government	1	Dept	. of Veteran A	Affairs
Clinical stall and working hours	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff
Clinical staff employed, by facility operation												
Physicians (MD, DO, Psychiatrist, etc.)	30	90	3.0	66	169	2.6	14	42	3.0	34	47	1.4
Registered nurses (RN)	30	363	12.1	67	572	8.5	14	154	11.0	34	50	1.5
Licensed practical nurses (LPN)	30	184	6.1	66	227	3.4	14	50	3.6	34	14	0.4
Mid-level medical personnel (Nurse Practitioner, PA,												
APRN, etc.)	30	33	1.1	66	85	1.3	14	23	1.6	34	21	0.6
Pharmacists	30	14	0.5	67	46	0.7	14	8	0.6	34	41	1.2
Doctoral level counselors (Psychologist, etc.)	30	14	0.5	67	19	0.3	14	7	0.5	33	20	0.6
Masters level counselors (MSW, etc.)	30	153	5.1	67	208	3.1	14	64	4.6	33	57	1.7
Other degreed counselors (BA, BS)	25	125	5.0	66	224	3.4	13	61	4.7	34	37	1.1
Associate or non-degreed counselors	27	108	4.0	67	213	3.2	13	24	1.8	32	12	0.4
			Average			Average			Average			Average
	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours	Number of staff	Number of hours	number of hours
Harris words diversity by facility and and	Or Starr	Hours	OI TIOUIS	Or Stair	OI HOUIS	OI HOUIS	Or Stall	nours	OI HOUIS	Or Stair	Tiours	OI HOUIS
Hours worked in a week, by facility operation Physicians (MD, DO, Psychiatrist, etc.)	90	2,005	22.3	169	3,387	20.0	42	1,105	26.3	47	1,009	21.5
Registered nurses (RN)	363	9,371	22.3 25.8	572	12,708	20.0	154	4.693	30.5	50	1,643	32.9
Licensed practical nurses (LPN)	184	5,761	31.3	227	5,257	23.2	50	1,351	27.0	14	498	35.6
Mid-level medical personnel (Nurse Practitioner, PA,	10-1	0,701	01.0	221	0,207	20.2		1,001	27.0	1-7	400	00.0
APRN, etc.)	33	756	22.9	85	1,712	20.1	23	503	21.9	21	620	29.5
Pharmacists	14	350	25.0	46	958	20.8	8	110	13.8	41	1,111	27.1
Doctoral level counselors (Psychologist, etc.)	14	532	38.0	19	426	22.4	7	240	34.3	20	550	27.5
Masters level counselors (MSW, etc.)	153	5,326	34.8	208	5,243	25.2	64	1,850	28.9	57	1,834	32.2
Other degreed counselors (BA, BS)	125	4,560	36.5	224	6,475	28.9	61	1,768	29.0	37	1,298	35.1
Associate or non-degreed counselors	108	3,871	35.8	213	4,844	22.7	24	920	38.3	12	410	34.2

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

Table 2.38. Clinical staff employed and average hours worked in a week, by treatment type: 2011

Number and hour

						Treatme	ent type					
Clinical staff and working hours		Total		Ма	intenance (	only	Det	toxification	only		maintenand detoxificatio	
Cliffical staff and working flours	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff	Number of facilities	Number of staff	Average number of staff
Clinical staff employed, by treatment type												
Physicians (MD, DO, Psychiatrist, etc.)	1,051	1,749	1.7	349	535	1.5	60	181	3.0	642	1,033	1.6
Registered nurses (RN)	1,048	2,285	2.2	348	522	1.5	61	688	11.3	639	1,075	1.7
Licensed practical nurses (LPN)	1,049	2,816	2.7	349	822	2.4	60	232	3.9	640	1,762	2.8
Mid-level medical personnel (Nurse Practitioner,												
PA, APRN, etc.)	1,045	611	0.6	347	163	0.5	60	87	1.5	638	361	0.6
Pharmacists	1,046	425	0.4	347	103	0.3	61	40	0.7	638	282	0.4
Doctoral level counselors (Psychologist, etc.)	1,040	208	0.2	346	70	0.2	61	28	0.5	633	110	0.2
Masters level counselors (MSW, etc.)	1,047	2,899	2.8	348	912	2.6	61	256	4.2	638	1,731	2.7
Other degreed counselors (BA, BS)	1,032	3,291	3.2	347	1,157	3.3	57	190	3.3	628	1,944	3.1
Associate or non-degreed counselors	1,019	1,858	1.8	341	552	1.6	59	177	3.0	619	1,129	1.8
	Number of staff	Number of hours	Average number of hours	Number of staff	Number of hours	Average number of hours	Number of staff	Number of hours	Average number of hours	Number of staff	Number of hours	Average number of hours
Hours worked in a week, by treatment type												
Physicians (MD, DO, Psychiatrist, etc.)	1,749	24,757	14.2	535	7,579	14.2	181	3,885	21.5	1,033	13,293	12.9
Registered nurses (RN)	2,285	56,991	24.9	522	14,106	27.0	688	16,322	23.7	1,075	26,563	24.7
Licensed practical nurses (LPN)	2,816	76,191	27.1	822	24,236	29.5	232	5,998	25.9	1,762	45,957	26.1
Mid-level medical personnel (Nurse Practitioner,												
PA, APRN, etc.)	611	12,779	20.9	163	3,813	23.4	87	1,869	21.5	361	7,097	19.7
Pharmacists	425	4,639	10.9	103	1,150	11.2	40	1,037	25.9	282	2,452	8.7
Doctoral level counselors (Psychologist, etc.)	208	4,918	23.6	70	1,425	20.4	28	883	31.5	110	2,610	23.7
Masters level counselors (MSW, etc.)	2,899	93,102	32.1	912	30,434	33.4	256	7,723	30.2	1,731	54,945	31.7
Other degreed counselors (BA, BS)	3,291	103,878	31.6	1,157	37,117	32.1	190	6,084	32.0	1,944	60,677	31.2
Associate or non-degreed counselors	1,858	56,622	30.5	552	16,328	29.6	177	4,547	25.7	1,129	35,747	31.7

Table 2.39. Computer software use for clinical management, by facility operation: 2011

Number and percent

					Facility of	peration			
			0	utpatient onl	У		Other		
Computer software use for clinical management		Total <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Dept. of Veterans Affairs
Number, by facility operation					Number o	of facilities			
	Total	1,081	568	311	53	31	70	14	34
OTP creates its own software and programs		649	363	195	30	9	26	8	18
OTP uses commercially available software		455	230	139	27	7	22	4	26
OTP uses paper only (No computer/electronic)		145	65	26	11	16	22	4	1
Percent, by computer software use					Column	percent			
	Total								
OTP creates its own software and programs		60.0	63.9	62.7	56.6	29.0	37.1	57.1	52.9
OTP uses commercially available software		42.1	40.5	44.7	50.9	22.6	31.4	28.6	76.5
OTP uses paper only (No computer/electronic)		13.4	11.4	8.4	20.8	51.6	31.4	28.6	2.9
Row percent distribution, by facility operation				F	Row percen	t distribution	1		
	Total	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
OTP creates its own software and programs		100.0	55.9	30.0	4.6	1.4	4.0	1.2	2.8
OTP uses commercially available software		100.0	50.5	30.5	5.9	1.5	4.8	0.9	5.7
OTP uses paper only (No computer/electronic)		100.0	44.8	17.9	7.6	11.0	15.2	2.8	0.7

<sup>&</sup>lt;sup>1</sup> Number of facilities may not add to total because a facility may use both software programs it has created and commercially available software.

<sup>&</sup>lt;sup>2</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

Table 2.40. Computer software use for clinical management, by treatment type: 2011

Number and percent

							Treatm	ent type					
			Number	of facilities	S		Columr	n percent			Row perce	nt distribut	ion
Computer software use for clinical management		Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification
	Total <sup>1</sup>	1,081	354	63	664								
OTP creates its own software and programs		649	202	22	425	60.0	57.1	34.9	64.0	100.0	31.1	3.4	65.5
OTP uses commercially available software		455	153	21	281	42.1	43.2	33.3	42.3	100.0	33.6	4.6	61.8
OTP uses paper only (No computer/electronic)		145	34	21	90	13.4	9.6	33.3	13.6	100.0	23.4	14.5	62.1

<sup>&</sup>lt;sup>1</sup> Number of facilities may not add to total because a facility may use both software and programs it has created and commercially available software.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

Table 2.41. Use of electronic resources, paper only, or a combination of both, by work activity and facility operation: 2011

Number and percent

						1141	iiber aiiu	-	operation							
				Number	of facilitie	s		-				Columr	n percent			
Made activity by made ad		Οι	utpatient o	only		Other				0	utpatient	only		Other		
Work activity by method		Private	Private		Private	Private		Dept. of		Private	Private		Private	Private		Dept. of
		for-	non-	Govern-	for-	non-	Govern-	Veterans		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment <sup>1</sup>	profit	profit	ment 1	Affairs	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs
Total	1,081	568	311	53	31	70	14	34								
Intake																
Computer/electronic only	114	31	38	4	2	12	2	25	10.5	5	12	8	6.5	17.1	14.3	73.5
Paper only	185	105	40	10	11	17	2		17.1	18	13	19	35.5	24.3	14.3	
Both electronic and paper	772	427	232	38	18	38	10	9	71.4	75	75	72	58.1	54.3	71.4	26.5
Assessment																
Computer/electronic only	202	73	74	8	3	14	1	29	18.7	13	24	15	9.7	20.0	7.1	85.3
Paper only	258	149	57	11	16	23	2		23.9	26	18	21	51.6	32.9	14.3	
Both electronic and paper	610	341	178	33	12	30	11	5	56.4	60	57	62	38.7	42.9	78.6	14.7
Treatment plan																
Computer/electronic only	328	151	107	15	3	17	4	31	30.3	27	34	28	9.7	24.3	28.6	91.2
Paper only	240	125	57	16	14	27	1		22.2	22	18	30	45.2	38.6	7.1	
Both electronic and paper	499	286	143	22	14	22	9	3	46.2	50	46	42	45.2	31.4	64.3	8.8
Discharge																
Computer/electronic only	262	111	88	12	3	14	2	32	24.2	20	28	23	9.7	20.0	14.3	94.1
Paper only	202	110	44	9	14	22	3		18.7	19	14	17	45.2	31.4	21.4	
Both electronic and paper	603	341	176	31	14	31	8	2	55.8	60	57	58	45.2	44.3	57.1	5.9
Referrals																
Computer/electronic only	95	42	16	4	2	4	1	26	8.8	7	5	8	6.5	5.7	7.1	76.5
Paper only	376	202	107	19	16	26	5	1	34.8	36	34	36	51.6	37.1	35.7	2.9
Both electronic and paper	594	316	185	30	13	35	8	7	54.9	56	59	57	41.9	50.0	57.1	20.6
Issue/receive lab results																
Computer/electronic only	220	99	52	9	3	22	4	31	20.4	17	17	17	9.7	31.4	28.6	91.2
Paper only	177	83	54	17	7	12	4		16.4	15	17	32	22.6	17.1	28.6	
Both electronic and paper	675	383	204	27	21	31	6	3	62.4	67	66	51	67.7	44.3	42.9	8.8
Billing																
Computer/electronic only	430	226	105	21	15	31	4	28	39.8	40	34	40	48.4	44.3	28.6	82.4
Paper only	92	51	20	10	2	6	1	2	8.5	9	6	19	6.5	8.6	7.1	5.9
Both electronic and paper	528	270	183	22	14	29	9	1	48.8	48	59	42	45.2	41.4	64.3	2.9
Outcomes management																
Computer/electronic only	206	100	59	10	1	6	1	29	19.1	18	19	19	3.2	8.6	7.1	85.3
Paper only	183	99	34	15	12	22	1		16.9	17	11	28	38.7	31.4	7.1	
Both electronic and paper	675	365	213	26	17	37	12	5	62.4	64	68	49	54.8	52.9	85.7	14.7
Medication dispensing	-		-	-		•			1			-		-	-	
Computer/electronic only	513	238	190	27	5	24	5	24	47.5	42	61	51	16.1	34.3	35.7	70.6
Paper only	89	29	15	11	12	19	3		8.2	5	5	21	38.7	27.1	21.4	
Both electronic and paper	468	296	103	15	14	24	6	10	43.3	52	33	28	45.2	34.3	42.9	29.4

Continued. See notes at end of table.

Table 2.41. Use of electronic resources, paper only, or a combination of both, by work activity and facility operation: 2011 (continued)

Number and percent

						1141	inder and		operation							
·				Number	of facilitie	s					F	Row percer	nt distribut	ion		
-		Οι	ıtpatient (	only		Other				0	utpatient (	only		Other		
Work activity by method		Private	Private		Private	Private		Dept. of		Private	Private		Private	Private		Dept. of
		for-	non-	Govern-	for-	non-	Govern-	Veterans		for-	non-	Govern-	for-	non-	Govern-	Veterans
	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs	Total	profit	profit	ment 1	profit	profit	ment <sup>1</sup>	Affairs
Total	1,081	568	311	53	31	70	14	34	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
Intake																
Computer/electronic only	114	31	38	4	2	12	2	25	100.0	27.2	33.3	3.5	1.8	10.5	1.8	21.9
Paper only	185	105	40	10	11	17	2		100.0	56.8	21.6	5.4	5.9	9.2	1.1	
Both electronic and paper	772	427	232	38	18	38	10	9	100.0	55.3	30.1	4.9	2.3	4.9	1.3	1.2
Assessment																
Computer/electronic only	202	73	74	8	3	14	1	29	100.0	36.1	36.6	4.0	1.5	6.9	0.5	14.4
Paper only	258	149	57	11	16	23	2		100.0	57.8	22.1	4.3	6.2	8.9	8.0	
Both electronic and paper	610	341	178	33	12	30	11	5	100.0	55.9	29.2	5.4	2.0	4.9	1.8	0.8
Treatment plan																
Computer/electronic only	328	151	107	15	3	17	4	31	100.0	46.0	32.6	4.6	0.9	5.2	1.2	9.5
Paper only	240	125	57	16	14	27	1		100.0	52.1	23.8	6.7	5.8	11.3	0.4	
Both electronic and paper	499	286	143	22	14	22	9	3	100.0	57.3	28.7	4.4	2.8	4.4	1.8	0.6
Discharge																
Computer/electronic only	262	111	88	12	3	14	2	32	100.0	42.4	33.6	4.6	1.1	5.3	0.8	12.2
Paper only	202	110	44	9	14	22	3		100.0	54.5	21.8	4.5	6.9	10.9	1.5	
Both electronic and paper	603	341	176	31	14	31	8	2	100.0	56.6	29.2	5.1	2.3	5.1	1.3	0.3
Referrals																
Computer/electronic only	95	42	16	4	2	4	1	26	100.0	44.2	16.8	4.2	2.1	4.2	1.1	27.4
Paper only	376	202	107	19	16	26	5	1	100.0	53.7	28.5	5.1	4.3	6.9	1.3	0.3
Both electronic and paper	594	316	185	30	13	35	8	7	100.0	53.2	31.1	5.1	2.2	5.9	1.3	1.2
Issue/receive lab results		0.0	.00	00		00	ŭ	·		00.2	•	<b>.</b>		0.0		
Computer/electronic only	220	99	52	9	3	22	4	31	100.0	45.0	23.6	4.1	1.4	10.0	1.8	14.1
Paper only	177	83	54	17	7	12	4		100.0	46.9	30.5	9.6	4.0	6.8	2.3	
Both electronic and paper	675	383	204	27	21	31	6	3	100.0	56.7	30.2	4.0	3.1	4.6	0.9	0.4
Billing	57.5	330	257	۷.	~'	٥,	J	l	.50.0	55.7	00.2	7.0	J	7.0	0.0	]
Computer/electronic only	430	226	105	21	15	31	4	28	100.0	52.6	24.4	4.9	3.5	7.2	0.9	6.5
Paper only	92	51	20	10	2	6	1	2	100.0	55.4	21.7	10.9	2.2	6.5	1.1	2.2
Both electronic and paper	528	270	183	22	14	29	9	1 1	100.0	51.1	34.7	4.2	2.7	5.5	1.7	0.2
Outcomes management	020	-, 0	100		'-	20	J	'	100.0	""	0-1.1	7.2		0.0	1.7	0.2
Computer/electronic only	206	100	59	10	1	6	1	29	100.0	48.5	28.6	4.9	0.5	2.9	0.5	14.1
Paper only	183	99	34	15	12	22	1		100.0	54.1	18.6	8.2	6.6	12.0	0.5	14.1
Both electronic and paper	675	365	213	26	17	37	12	5	100.0	54.1	31.6	3.9	2.5	5.5	1.8	0.7
Medication dispensing	013	303	210	20	''	31	14		100.0	J4.1	31.0	5.3		5.5	1.0	0.7
Computer/electronic only	513	238	190	27	5	24	5	24	100.0	46.4	37.0	5.3	1.0	4.7	1.0	4.7
Paper only	89	236	15	11	12	2 <del>4</del> 19	3		100.0	32.6	16.9	12.4	13.5	21.3	3.4	4.7
Both electronic and paper	69 468	296	103	11 15	14	24	ა 6	10	100.0	63.2	22.0	3.2	3.0	∠1.3 5.1	3.4 1.3	2.1
1 Covernment includes state gov	400	290	103	เอ	14	24	Ü	10	100.0	03.2	22.0	3.Z	3.0		1.3	2.1

Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

Table 2.42. Use of electronic resources, paper only, or a combination of both, by work activity and treatment type: 2011

Number and percent

							Treat	ment type					
	_		Number	of facilities	S		Colun	nn percent			Row perce	ent distribut	ion
Work activity by method	_	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification
	Total	1081	354	63	664								
Intake													
Computer/electronic only		114	42	8	64	10.5	11.9	12.7	9.6	100.0	36.8	7.0	56.1
Paper only		185	64	20	101	17.1	18.1	31.7	15.2	100.0	34.6	10.8	54.6
Both electronic and paper		772	245	34	493	71.4	69.2	54.0	74.2	100.0	31.7	4.4	63.9
Assessment													
Computer/electronic only		202	82	9	111	18.7	23.2	14.3	16.7	100.0	40.6	4.5	55.0
Paper only		258	81	25	152	23.9	22.9	39.7	22.9	100.0	31.4	9.7	58.9
Both electronic and paper		610	186	28	396	56.4	52.5	44.4	59.6	100.0	30.5	4.6	64.9
Treatment plan													
Computer/electronic only		328	131	11	186	30.3	37.0	17.5	28.0	100.0	39.9	3.4	56.7
Paper only		240	76	27	137	22.2	21.5	42.9	20.6	100.0	31.7	11.3	57.1
Both electronic and paper		499	143	24	332	46.2	40.4	38.1	50.0	100.0	28.7	4.8	66.5
Discharge						-							
Computer/electronic only		262	102	7	153	24.2	28.8	11.1	23.0	100.0	38.9	2.7	58.4
Paper only		202	69	23	110	18.7	19.5	36.5	16.6	100.0	34.2	11.4	54.5
Both electronic and paper		603	180	31	392	55.8	50.8	49.2	59.0	100.0	29.9	5.1	65.0
Referrals												• • •	
Computer/electronic only		95	41	4	50	8.8	11.6	6.3	7.5	100.0	43.2	4.2	52.6
Paper only		376	124	28	224	34.8	35.0	44.4	33.7	100.0	33.0	7.4	59.6
Both electronic and paper		594	183	29	382	54.9	51.7	46.0	57.5	100.0	30.8	4.9	64.3
Issue/receive lab results				-		0	0	.0.0	0.10		55.5		00
Computer/electronic only		220	61	19	140	20.4	17.2	30.2	21.1	100.0	27.7	8.6	63.6
Paper only		177	64	15	98	16.4	18.1	23.8	14.8	100.0	36.2	8.5	55.4
Both electronic and paper		675	227	28	420	62.4	64.1	44.4	63.3	100.0	33.6	4.1	62.2
Billing		0.0		_0	0	02.4	04.1		00.0	100.0	00.0	7.1	02.2
Computer/electronic only		430	138	25	267	39.8	39.0	39.7	40.2	100.0	32.1	5.8	62.1
Paper only		92	35	5	52	8.5	9.9	7.9	7.8	100.0	38.0	5.4	56.5
Both electronic and paper		528	171	32	325	48.8	48.3	50.8	48.9	100.0	32.4	6.1	61.6
Outcomes management		<b>0-0</b>	I	-	523	40.0	40.0	00.0	₹0.0	100.0	J 02	0.1	01.0
Computer/electronic only		206	76	5	125	19.1	21.5	7.9	18.8	100.0	36.9	2.4	60.7
Paper only		183	47	21	115	16.9	13.3	33.3	17.3	100.0	25.7	11.5	62.8
Both electronic and paper		675	225	34	416	62.4	63.6	54.0	62.7	100.0	33.3	5.0	61.6
Medication dispensing		0,0		0-7	710	02.4	05.0	J <del>4</del> .0	02.7	100.0	33.3	5.0	01.0
Computer/electronic only		513	189	14	310	47.5	53.4	22.2	46.7	100.0	36.8	2.7	60.4
Paper only		89	31	21	37	8.2	8.8	33.3	5.6	100.0	34.8	23.6	41.6
Both electronic and paper		468	132	27	309	43.3	37.3	33.3 42.9	46.5	100.0	28.2	23.6 5.8	66.0
OCUPOE Contactor (or Baltardara				0		43.3		42.9	40.0			3.0	00.0

Table 2.43. Internet access, by facility operation: 2011

Number and percent

		ı		<i></i>	-::::::::::::::::::::::::::::::::::::::			
			Outpatient on		cility operat	ion Other facilitie	98	1
Internet access	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veteran Affairs
	rotar	ioi pioin	non prom		of facilities	non prom		
	1,081	568	311	53	31	70	14	34
OTP computers have the capability to access the Internet	1,063	555	309	53	31	68	13	34
OTP primarily access the Internet using  Dial-up telephone line	32	20	7	4		1		
DSL, cable modem, fiber optics, satellite,				·		·		22
wireless (Wi-Fi) or other broadband Other	1,011 4	527 2	293 2	48 	31	66 	13 	33
		•		Column	percent			•
Percent, by Internet access OTP computers have the capability to access the Internet OTP primarily access the Internet using	98.3	97.7	99.4	100.0	100.0	97.1	92.9	100.0
Dial-up telephone line	3.0	3.5	2.3	7.5		1.4		
DSL, cable modem, fiber optics, satellite, wireless (Wi-Fi) or other broadband Other	93.5 0.4	92.8 0.4	94.2 0.6	90.6	100.0	94.3	92.9	97.1 
	<u> </u>							Į.
Dave managed distribution by facility		1		Row percen	t distributio	n		ı
Row percent distribution, by facility operation OTP computers have the capability to	100.0	52.5	28.8	4.9	2.9	6.5	1.3	3.1
access the Internet OTP primarily access the Internet	100.0	52.2	29.1	5.0	2.9	6.4	1.2	3.2
using Dial-up telephone line	100.0	62.5	21.9	12.5		3.1		
DSL, cable modem, fiber optics, satellite, wireless (Wi-Fi) or other broadband Other	100.0 100.0	52.1 50.0	29.0 50.0	4.7	3.1 	6.5	1.3	3.3

<sup>&</sup>lt;sup>1</sup>Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 2.44. Internet access, by treatment type: 2011

Number and percent

							T	reatment ty	γpe				
			Nui	mber of fac	cilities		Columi	n percent			Row perce	nt distribut	ion
Internet access		Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detox- ification
	Total	1,081	354	63	664								
OTP computers have the capability to access the Internet		1,063	351	62	650	98.3	99.2	98.4	97.9	100.0	33.0	5.8	61.1
OTP primarily access the Internet using													
Dial-up telephone line		32	15	1	16	3.0	4.2	1.6	2.4	100.0	46.9	3.1	50.0
DSL, cable modem, fiber optics, satellite, wireless (Wi-Fi) or other broadband		1,011	326	60	625	93.5	92.1	95.2	94.1	100.0	32.2	5.9	61.8
Other		4	1		3	0.4	0.3		0.5	100.0	25.0		75.0

<sup>- -</sup> Quantity is zero.

Table 2.45. Outpatient travel time and urban/rural location of facility, by facility operation: 2011

Number and percent

		1 (ullik	ci and pe	ıccııı					
					Fa	acility opera	tion		
				Outpatient on	ly	(	Other facilities	3	Dept. of
Outpatient travel time and urban/rural location			Private	Private	Govern-	Private	Private	Govern-	Veterans
		Total	for-profit	non-profit	ment 1	for-profit	non-profit	ment 1	Affairs
Outpatient travel time, by facility operation			•		Number	of facilities			
	Total	1,081	568	311	53	31	70	14	34
Travel an hour or more each way		635	380	170	33	3	19	3	27
Large central metro		249	115	92	10		6	1	25
Large fringe metro		108	66	27	8	1	4		2
Medium metro		151	104	35	6	1	4	1	
Small metro		72	57	9	1	1	4		
Micropolitan		37	28	6	2		1		
Noncore		11	10	1					
U.S. territory		7			6			1	
Percent, by urban/rural location	_				Columr	percent			
	Total								
Travel an hour or more each way		58.7	66.9	54.7	62.3	9.7	27.1	21.4	79.4
Large central metro		23.0	20.2	29.6	18.9		8.6	7.1	73.5
Large fringe metro		10.0	11.6	8.7	15.1	3.2	5.7		5.9
Medium metro		14.0	18.3	11.3	11.3	3.2	5.7	7.1	
Small metro		6.7	10.0	2.9	1.9	3.2	5.7		
Micropolitan		3.4	4.9	1.9	3.8		1.4		
Noncore		1.0	1.8	0.3					
U.S. territory		0.6			11.3			7.1	
Percent distribution, by facility operation			•		Row percei	nt distributio	n		
	Total								
Travel an hour or more each way		100.0	59.8	26.8	5.2		3.0	0.5	4.3
Large central metro		100.0	46.2	36.9	4.0		2.4	0.4	10.0
Large fringe metro		100.0	61.1	25.0	7.4	0.9	3.7		1.9
Medium metro		100.0	68.9	23.2	4.0	0.7	2.6	0.7	
Small metro		100.0	79.2	12.5	1.4	1.4	5.6		
Micropolitan		100.0	75.7	16.2	5.4		2.7		
Noncore		100.0	90.9	9.1					
U.S. territory		100.0			85.7			14.3	

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 2.46. Outpatient travel time and urban/rural location of facility, by treatment type: 2011

Number and percent

						Treatr	nent type					
		Number	of facilities			Colum	n percent			Row perce	nt distributi	on
Outpatient travel time and urban/rural location	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Mainte- nance only	Detoxi- fication only	Both main- tenance and detoxi- fication
То	tal 1,081	354	63	664								
Travel an hour or more												
each way	635	229	11	395	58.7	64.7	17.5	59.5	100.0	36.1	1.7	62.2
Large central metro	249	93	6	150	23.0	26.3	9.5	22.6	100.0	37.3	2.4	60.2
Large fringe metro	108	38	2	68	10.0	10.7	3.2	10.2	100.0	35.2	1.9	63.0
Medium metro	151	52	3	96	14.0	14.7	4.8	14.5	100.0	34.4	2.0	63.6
Small metro	72	23		49	6.7	6.5		7.4	100.0	31.9		68.1
Micropolitan	37	14		23	3.4	4.0		3.5	100.0	37.8		62.2
Noncore	11	5		6	1.0	1.4		0.9	100.0	45.5		54.5
U.S. territory	7	4		3	0.6	1.1		0.5	100.0	57.1		42.9

<sup>- -</sup> Quantity is zero.

Table 3.1. Admissions<sup>1</sup> to an OTP in 2010, by facility operation and treatment type: 2011 Number and percent

				Fá	acility operat	ion		
Transference to the		(	Dutpatient on	ly		Other		Dept. of
Treatment type	Total	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Veterans Affairs
		•		Number of	admissions			
Number, by facility operation	244,780	101,661	52,804	6,956	22,388	47,949	11,307	1,715
Maintenance only	52,630	25,702	21,573	2,486	138	1,966	380	385
Detoxification only	55,996	647			10,542	38,145	6,661	1
Both maintenance and detoxification	136,154	75,312	31,231	4,470	11,708	7,838	4,266	1,329
			С	olumn perce	nt distributio	n		
Percent distribution, by treatment type	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Maintenance only	21.5	25.3	40.9	35.7	0.6	4.1	3.4	22.4
Detoxification only	22.9	0.6			47.1	79.6	58.9	0.1
Both maintenance and detoxification	55.6	74.1	59.1	64.3	52.3	16.3	37.7	77.5
				Row percen	t distribution			
Percent distribution, by facility operation	100.0	41.5	21.6	2.8	9.1	19.6	4.6	0.7
Maintenance only	100.0	48.8	41.0	4.7	0.3	3.7	0.7	0.7
Detoxification only	100.0	1.2			18.8	68.1	11.9	*
Both maintenance and detoxification	100.0	55.3	22.9	3.3	8.6	5.8	3.1	1.0

<sup>&</sup>lt;sup>1</sup> Admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

<sup>&</sup>lt;sup>2</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.2. All patients in treatment, by facility operation and treatment type: March 31, 2011

Number and percent

_				Fá	acility operat	ion		
Treatment type		(	Dutpatient on	ly		Other		Dept. of
Trouble type	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
				Number o	f patients			
Number, by facility operation	300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165
Maintenance only	104,563	46,464	47,323	7,930	123	1,348	30	1,345
Detoxification only	1,494	60			309	950	115	60
Both maintenance and detoxification	194,490	119,304	55,808	11,397	746	2,428	2,047	2,760
			C	olumn perce	nt distributio	on		-
Percent distribution, by treatment type	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Maintenance only	34.8	28.0	45.9	41.0	10.4	28.5	1.4	32.3
Detoxification only	0.5	*			26.2	20.1	5.2	1.4
Both maintenance and detoxification	64.7	71.9	54.1	59.0	63.3	51.4	93.4	66.3
			ı	Row percen	t distribution			-
Percent distribution, by facility operation	100.0	55.2	34.3	6.4	0.4	1.6	0.7	1.4
Maintenance only	100.0	44.4	45.3	7.6	0.1	1.3	*	1.3
Detoxification only	100.0	4.0			20.7	63.6	7.7	4.0
Both maintenance and detoxification	100.0	61.3	28.7	5.9	0.4	1.2	1.1	1.4

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.3. Admissions<sup>1</sup> to an OTP in 2010, by medication type and facility operation: 2011 Number and percent

				Fa	cility operati	ion		
			Outpatient onl	у		Other		
Medication type	Total	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Private for-profit	Private non-profit	Govern- ment <sup>2</sup>	Dept. of Veterans Affairs
				Number of a				
Number, by facility operation	244,780	101,661	52,804	6,956	22,388	47,949	11,307	1,715
Methadone only	153,614	61,581	37,751	5,577	15,242	28,945	3,991	527
Buprenorphine only	13,568	10	160	88	1,893	7,990	3,427	
Both methadone and buprenorphine	76,500	39,898	14,743	1,291	4,953	10,538	3,889	1,188
Unknown	1,098	172	150		300	476		
		-	Co	olumn perce	nt distributio	n		
Percent distribution, by medication type	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Methadone only	62.8	60.6	71.5	80.2	68.1	60.4	35.3	30.7
Buprenorphine only	5.5	*	0.3	1.3	8.5	16.7	30.3	
Both methadone and buprenorphine	31.3	39.3	27.9	18.6	22.1	22.0	34.4	69.3
Unknown	0.5	0.2	0.3		1.3	1.0		
			F	Row percent	distribution			
Percent distribution, by facility operation	100.0	41.5	21.6	2.8	9.2	19.6	4.6	0.7
Methadone only	100.0	40.1	24.6	3.6	9.9	18.8	2.6	0.3
Buprenorphine only	100.0	0.1	1.2	0.7	14.0	58.9	25.3	
Both methadone and buprenorphine	100.0	52.2	19.3	1.7	6.5	13.8	5.1	1.6
Unknown	100.0	15.7	13.7		27.3	43.4		

<sup>&</sup>lt;sup>1</sup> Admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

<sup>&</sup>lt;sup>2</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.4. All patients in treatment, by medication type and facility operation: March 31, 2011

Number and percent

				F	acility operati	ion		
Marka diameter		(	Outpatient only	/		Other		Dept. of
Medication type	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
		•		Number o	of patients			•
Number, by facility operation	300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165
Methadone only	209,758	106,294	79,992	16,882	606	2,957	1,475	1,552
Buprenorphine only	795	25	81	151	146	313	79	
Both methadone and buprenorphine	89,514	59,311	22,925	2,294	401	1,332	638	2,613
Unknown	480	198	133		25	124		
			(	Column perce	ent distributio	n		
Percent distribution, by treatment type	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Methadone only	69.8	64.1	77.6	87.4	51.4	62.6	67.3	37.3
Buprenorphine only	0.3	*	0.1	0.8	12.4	6.6	3.6	
Both methadone and buprenorphine	29.8	35.8	22.2	11.9	34.0	28.2	29.1	62.7
Unknown	0.2	0.1	0.1		2.1	2.6		
				Row percen	t distribution			-
Percent distribution, by facility operation	100.0	55.2	34.3	6.4	0.4	1.6	0.7	1.4
Methadone only	100.0	50.7	38.1	8.1	0.3	1.4	0.7	0.7
Buprenorphine only	100.0	3.1	10.2	19.0	18.4	39.4	9.9	
Both methadone and buprenorphine	100.0	66.3	25.6	2.6	0.5	1.5	0.7	2.9
Unknown	100.0	41.3	27.7		5.2	25.8		

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.5. Admissions<sup>1</sup> to an OTP in 2010 and all patients in treatment on March 31, 2011, by medication type and treatment type: 2011

Number and percent

-						Treatm	nent type					
		Nui	mber			Column perd	ent distribu	ıtion		Row perce	nt distributi	on
Medication type				Both main-				Both main-				Both main-
wedication type		Main-	Detoxi-	tenance and		Main-	Detoxi-	tenance and		Main-	Detoxi-	tenance and
		tenance	fication	detoxi-		tenance	fication	detoxi-		tenance	fication	detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Admissions in 2010	244,780	52,630	55,996	136,154	100.0	100.0	100.0	100.0	100.0	21.5	22.9	55.6
Methadone only	153,614	39,229	35,310	79,075	62.8	74.5	63.1	58.1	100.0	25.5	23.0	51.5
Buprenorphine only	13,568	1,238	11,089	1,241	5.5	2.4	19.8	0.9	100.0	9.1	81.7	9.1
Both methadone and buprenorphine	76,500	11,491	9,297	55,712	31.3	21.8	16.6	40.9	100.0	15.0	12.2	72.8
Unknown	1,098	672	300	126	0.4	1.3	0.5	0.1	100.0	61.2	27.3	11.5
All patients on March 31, 2011	300,547	104,563	1,494	194,490	100.0	100.0	100.0	100.0	100.0	34.8	0.5	64.7
Methadone only	209,758	85,991	719	123,048	69.8	82.2	48.1	63.3	100.0	41.0	0.3	58.7
Buprenorphine only	795	319	387	89	0.3	0.3	25.9	*	100.0	40.1	48.7	11.2
Both methadone and buprenorphine	89,514	17,798	363	71,353	29.8	17.0	24.3	36.7	100.0	19.9	0.4	79.7
Unknown	480	455	25		0.2	0.4	1.7		100.0	94.8	5.2	

<sup>&</sup>lt;sup>1</sup> Admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.6. Admissions<sup>1</sup> to an OTP in 2010, by urban/rural location and facility operation: 2011

Number and percent

_				Fa	acility operati	on		
Light and for well to a a time.		(	Outpatient onl	у		Other		Dept. of
Urban/rural location		Private	Private	Govern-	Private	Private	Govern-	Veterans
	Total	for-profit	non-profit	ment <sup>2</sup>	for-profit	non-profit	ment <sup>2</sup>	Affairs
				Number of a	admissions <sup>1</sup>			
Number, by facility operation	244,780	101,661	52,804	6,956	22,388	47,949	11,307	1,715
Large central metro	114,030	35,051	28,108	3,299	10,074	28,798	7,162	1,538
Large fringe metro	54,070	24,337	9,002	1,401	6,751	11,447	1,100	32
Medium metro	46,673	25,971	12,507	892	2,025	3,197	1,936	145
Small metro	15,757	10,229	1,366	60	2,870	1,172	60	
Micropolitan	9,509	4,926	1,485	111		2,375	612	
Noncore	3,111	1,147	336		668	960		
U.S. territory	1,630			1,193			437	
			(	Column perce	ent distributio	n		
Percent distribution, by								
urban/rural location	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Large central metro	46.6	34.5	53.2	47.4	45.0	60.1	63.3	89.7
Large fringe metro	22.1	23.9	17.1	20.1	30.2	23.9	9.7	1.9
Medium metro	19.1	25.6	23.7	12.8	9.1	6.7	17.1	8.5
Small metro	6.4	10.1	2.6	0.9	12.8	2.4	0.5	
Micropolitan	3.9	4.9	2.8	1.6		5.0	5.4	
Noncore	1.3	1.1	0.6		3.0	2.0		
U.S. territory	0.7			17.2			3.9	
				Row percen	t distribution			
Percent distribution, by								
facility operation	100.0	41.5	21.6	2.8	9.2	19.6	4.6	0.7
Large central metro	100.0	30.7	24.7	2.9	8.8	25.3	6.3	1.4
Large fringe metro	100.0	45.0	16.7	2.6	12.5	21.2	2.0	0.1
Medium metro	100.0	55.6	26.8	1.9	4.3	6.9	4.2	0.3
Small metro	100.0	64.9	8.7	0.4	18.2	7.4	0.4	
Micropolitan	100.0	51.8	15.6	1.2		25.0	6.4	
Noncore	100.0	36.9	10.8		21.5	30.9		
U.S. territory	100.0			73.2			26.8	

<sup>&</sup>lt;sup>1</sup> Admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

<sup>&</sup>lt;sup>2</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 3.7. All patients in treatment, by urban/rural location and facility operation: March 31, 2011

Number and percent

				Fa	acility operati	on		
Urban/rural location		(	Outpatient-onl	у		Other		Dept. of
Orban/nural location	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
				Number o	of patients			
Number, by facility								
operation	300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165
Large central metro	129,580	54,298	62,114	6,741	585	1,603	367	3,872
Large fringe metro	54,471	36,485	13,295	3,750	209	463	108	161
Medium metro	71,886	45,188	22,852	1,765	146	1,517	286	132
Small metro	20,655	17,062	2,298	90	144	1,060	1	
Micropolitan	11,800	9,496	2,016	164		63	61	
Noncore	3,969	3,299	556		94	20		
U.S. territory	8,186			6,817			1,369	
			(	Column perce	ent distributio	n		
Percent distribution, by								
urban/rural location	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Large central metro	43.1	32.7	60.2	34.9	49.7	33.9	16.7	93.0
Large fringe metro	18.1	22.0	12.9	19.4	17.7	9.8	4.9	3.9
Medium metro	23.9	27.3	22.2	9.1	12.4	32.1	13.1	3.2
Small metro	6.9	10.3	2.2	0.5	12.2	22.4	0.1	
Micropolitan	3.9	5.7	2.0	0.9		1.3	2.8	
Noncore	1.3	2.0	0.5		8.0	0.4		
U.S. territory	2.7			35.3			62.5	
				Row percen	nt distribution			
Percent distribution, by								
facility operation	100.0	55.2	34.3	6.4	0.4	1.6	0.7	1.4
Large central metro	100.0	41.9	47.9	5.2	0.5	1.2	0.3	3.0
Large fringe metro	100.0	67.0	24.4	6.9	0.4	0.9	0.2	0.3
Medium metro	100.0	62.9	31.8	2.5	0.2	2.1	0.4	0.2
Small metro	100.0	82.6	11.1	0.4	0.7	5.1	*	
Micropolitan	100.0	80.5	17.1	1.4		0.5	0.5	
Noncore	100.0	83.1	14.0		2.4	0.5		
U.S. territory	100.0			83.3			16.7	

<sup>&</sup>lt;sup>1</sup>Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.8. Admissions<sup>1</sup> to an OTP in 2010 and all patients in treatment on March 31, 2011, by urban/rural location and treatment type: 2011

Number and percent

						Treatn	nent type					
		Nun	nber		(	Column perc	ent distribu	ıtion		Row percen	t distribution	)
Urban/rural location				Both main-				Both main-				Both main-
Orbaryrara recation		Main-	Detoxi-	tenance		Main-	Detoxi-	tenance		Main-	Detoxi-	tenance
		tenance	fication	and detoxi-		tenance	fication	and detoxi-		tenance	fication	and detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Admissions <sup>1</sup> in 2010	244,780	52,630	55,996	136,154	100.0	100.0	100.0	100.0	100.0	21.5	22.9	55.6
U.S. territory	1,630	395		1,235	0.7	0.8		0.9	100.0	24.2		75.8
Large central metro	114,030	22,563	35,923	55,544	46.6	42.9	64.2	40.8	100.0	19.8	31.5	48.7
Large fringe metro	54,070	10,940	9,525	33,605	22.1	20.8	17.0	24.7	100.0	20.2	17.6	62.2
Medium metro	46,673	11,168	5,656	29,849	19.1	21.2	10.1	21.9	100.0	23.9	12.1	64.0
Small metro	15,757	3,859	2,827	9,071	6.4	7.3	5.0	6.7	100.0	24.5	17.9	57.6
Micropolitan	9,509	3,035	2,065	4,409	3.9	5.8	3.7	3.2	100.0	31.9	21.7	46.4
Noncore	3,111	670		2,441	1.3	1.3		1.8	100.0	21.5		78.5
All patients on March 31, 2011	300,547	104,563	1,494	194,490	100.0	100.0	100.0	100.0	100.0	34.8	0.5	64.7
U.S. territory	8,186	2,643		5,543	2.7	2.5		2.9	100.0	32.3		67.7
Large central metro	129,580	51,198	732	77,650	43.1	49.0	49.0	39.9	100.0	39.5	0.6	59.9
Large fringe metro	54,471	18,059	368	36,044	18.1	17.3	24.6	18.5	100.0	33.2	0.7	66.2
Medium metro	71,886	20,947	238	50,701	23.9	20.0	15.9	26.1	100.0	29.1	0.3	70.5
Small metro	20,655	6,601	108	13,946	6.9	6.3	7.2	7.2	100.0	32.0	0.5	67.5
Micropolitan	11,800	3,671	48	8,081	3.9	3.5	3.2	4.2	100.0	31.1	0.4	68.5
Noncore	3,969	1,444		2,525	1.3	1.4		1.3	100.0	36.4		63.6

<sup>&</sup>lt;sup>1</sup> Admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year would be counted as two admissions.

<sup>- -</sup> Quantity is zero.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

Table 3.9. All patients in treatment, by gender, age at admission, race/ethnicity, veteran status, and facility operation: March 31, 2011

Number and percent

							Facil	ity operatior	)							
	,		N	umber of p	atients						Co	lumn perc	ent distribu	ıtion		
Gender, age at admission,		0	utpatient onl	у		Other				(	Dutpatient or	าly		Other		
race/ethnicity, and veteran status					Private	Private		Dept. of		Private				Private		Dept. of
status		Private	Private	Govern-	for-	non-	Govern-	Veterans		for-	Private	Govern-	Private	non-	Govern-	Veterans
	Total	for-profit	non-profit	ment 1	profit	profit	ment 1	Affairs	Total	profit	non-profit	ment 1	for-profit	profit	ment 1	Affairs
Tota	d 300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Gender	,		,	•		,	,	,								
Male	161,688	88,650	51,659	12,637	699	2,395	1,645	4,003	53.8	53.5	50.1	65.4	59.3	50.7	75.0	96.1
Female	112,978	64,918	39,618	6,060	316	1,508	436	122	37.6	39.1	38.4	31.4	26.8	31.9	19.9	2.9
Unknown/not collected	25,881	12,260	11,854	630	163	823	111	40	8.6	7.4	11.5	3.3	13.8	17.4	5.1	1.0
Age at admission																
Under 18	145	13	116	3		10	3		*	*	0.1	*		0.2	0.1	
18-34	94,584	60,988	27,211	4,026	421	1,380	251	307	31.5	36.8	26.4	20.8	35.7	29.2	11.5	7.4
35-54	110,795	56,871	42,928	7,972	460	1,297	241	1,026	36.9	34.3	41.6	41.2	39.0	27.4	11.0	24.6
55 and over	44,347	20,139	18,204	3,488	62	298	68	2,088	14.8	12.1	17.7	18.0	5.3	6.3	3.1	50.1
Unknown/not collected	50,676	27,817	14,672	3,838	235	1,741	1,629	744	16.9	16.8	14.2	19.9	19.9	36.8	74.3	17.9
Race/ethnicity																
White (non-Hispanic)	172,676	118,211	44,553	5,665	390	1,991	465	1,401	57.5	71.3	43.2	29.3	33.1	42.1	21.2	33.6
Black (non-Hispanic)	34,488	10,533	19,411	2,204	290	501	71	1,478	11.5	6.4	18.8	11.4	24.6	10.6	3.2	35.5
Hispanic	37,686	14,329	18,182	4,318	85	347	74	351	12.5	8.6	17.6	22.3	7.2	7.3	3.4	8.4
Asian	1,580	885	620	56	1	7	2	9	0.5	0.5	0.6	0.3	0.1	0.1	0.1	0.2
American Indian or Alaska							_									
Native	2,177	1,332	530	298		1	6	10	0.7	0.8	0.5	1.5		*	0.3	0.2
Native Hawaiian or other Pacific Islander	338	158	134	37		5		4	0.1	0.1	0.1	0.2		0.1		0.1
Two or more races	2,274	1,004	1,113	95	::	46	14	2	0.1	0.1	1.1	0.2		1.0	0.6	*
Unknown/not collected	49,328	19,376	18,588	6,654	412	1,828	1,560	910	16.4	11.7	18.0	34.4	35.0	38.7	71.2	21.8
Veteran status	49,320	19,570	10,500	0,054	412	1,020	1,300	910	10.4	11.7	10.0	34.4	33.0	30.7	71.2	21.0
Veteran	9,698	2,997	2,235	463	5	76	9	3,913	3.2	1.8	2.2	2.4	0.4	1.6	0.4	93.9
Non-veteran	95,403	49,607	37,261	6,935	253	1,165	179	3,913	31.7	29.9	36.1	35.9	21.5	24.7	8.2	0.1
Unknown/not collected	195,446	113.224	63,635	11.929	920	3,485	2,004	249	65.0	68.3	61.7	61.7	78.1	73.7	91.4	6.0
	190,440	110,224	00,000	11,023	520	5,705	2,004	273	00.0	00.5	01.7	01.7	70.1	10.1	J 1. <del>-1</del>	0.0

Continued. See notes at end of table.

Table 3.9. All patients in treatment, by gender, age at admission, race/ethnicity, veteran status, and facility operation: March 31, 2011 (continued)

Number and percent

							Facil	ity operatior	)							
	,		N	umber of p	atients						F	Row percei	nt distributi	on		
Gender, age at admission,		0	utpatient onl	У		Other					Outpatient or	าly		Other		
race/ethnicity, and veteran status					Private	Private		Dept. of		Private				Private		Dept. of
status		Private	Private	Govern-	for-	non-	Govern-	Veterans		for-	Private	Govern-	Private	non-	Govern-	Veterans
	Total	for-profit	non-profit	ment 1	profit	profit	ment 1	Affairs	Total	profit	non-profit	ment 1	for-profit	profit	ment 1	Affairs
Tota	d 300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165	100.0	55.2	34.3	6.4	0.4	1.6	0.7	1.4
Gender	ŕ	,	,	•	,	,	,	,								
Male	161,688	88,650	51,659	12,637	699	2,395	1,645	4,003	100.0	54.8	31.9	7.8	0.4	1.5	1.0	2.5
Female	112,978	64,918	39,618	6,060	316	1,508	436	122	100.0	57.5	35.1	5.4	0.3	1.3	0.4	0.1
Unknown/not collected	25,881	12,260	11,854	630	163	823	111	40	100.0	47.4	45.8	2.4	0.6	3.2	0.4	0.2
Age at admission																
Under 18	145	13	116	3		10	3		100.0	9.0	80.0	2.1		6.9	2.1	
18-34	94,584	60,988	27,211	4,026	421	1,380	251	307	100.0	64.5	28.8	4.3	0.4	1.5	0.3	0.3
35-54	110,795	56,871	42,928	7,972	460	1,297	241	1,026	100.0	51.3	38.7	7.2	0.4	1.2	0.2	0.9
55 and over	44,347	20,139	18,204	3,488	62	298	68	2,088	100.0	45.4	41.0	7.9	0.1	0.7	0.2	4.7
Unknown/not collected	50,676	27,817	14,672	3,838	235	1,741	1,629	744	100.0	54.9	29.0	7.6	0.5	3.4	3.2	1.5
Race/ethnicity																
White (non-Hispanic)	172,676	118,211	44,553	5,665	390	1,991	465	1,401	100.0	68.5	25.8	3.3	0.2	1.2	0.3	0.8
Black (non-Hispanic)	34,488	10,533	19,411	2,204	290	501	71	1,478	100.0	30.5	56.3	6.4	0.8	1.5	0.2	4.3
Hispanic	37,686	14,329	18,182	4,318	85	347	74	351	100.0	38.0	48.2	11.5	0.2	0.9	0.2	0.9
Asian	1,580	885	620	56	1	7	2	9	100.0	56.0	39.2	3.5	0.1	0.4	0.1	0.6
American Indian or Alaska							_									
Native	2,177	1,332	530	298		1	6	10	100.0	61.2	24.3	13.7		*	0.3	0.5
Native Hawaiian or other Pacific Islander	338	158	134	37		5		4	100.0	46.7	39.6	10.9		1.5		1.2
Two or more races	2,274	1.004	1,113	95		46	14	2	100.0	44.2	48.9	4.2		2.0	0.6	0.1
Unknown/not collected	49,328	19,376	18,588	6,654	412	1,828	1,560	910	100.0	39.3	37.7	13.5	0.8	3.7	3.2	1.8
Veteran status	43,320	19,570	10,500	0,054	414	1,020	1,500	310	100.0	39.3	31.1	13.5	0.6	3.1	3.2	1.0
Veteran	9,698	2,997	2,235	463	5	76	9	3,913	100.0	30.9	23.0	4.8	0.1	0.8	0.1	40.3
Non-veteran	95,403	49,607	37,261	6,935	253	1,165	179	3,913	100.0	52.0	39.1	7.3	0.1	1.2	0.1	*
Unknown/not collected	195,446	113.224	63.635	11.929	920	3,485	2,004	249	100.0	57.9	32.6	6.1	0.5	1.8	1.0	0.1
OTHER TOWN IN THE CONTROLLED	100,770	110,224	00,000	11,023	520	5,705	2,004	273	100.0	57.5	52.0	0.1	0.0	1.0	1.0	0.1

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.10. All patients in treatment, by gender, age at admission, race/ethnicity, veteran status, and treament type: March 31, 2011

Number and percent

_						Treatme	nt type					
Gender, age at admission,		Number c	of patients		(	Column per	cent distrik	oution		Row perce	ent distribu	tion
race/ethnicity, and veteran				Both main-				Both main-				Both main-
status		Main-	Detoxi-	tenance and		Main-	Detoxi-	tenance and		Main-	Detoxi-	tenance and
		tenance	fication	detoxi-		tenance	fication	detoxi-		tenance	fication	detoxi-
	Total	only	only	fication	Total	only	only	fication	Total	only	only	fication
Total	300,547	104,563	1,494	194,490	100.0	100.0	100.0	100.0	100.0	34.8	0.5	64.7
Gender												
Male	161,688	53,808	811	107,069	53.8	51.5	54.3	55.1	100.0	33.3	0.5	66.2
Female	112,978	38,758	337	73,883	37.6	37.1	22.6	38.0	100.0	34.3	0.3	65.4
Unknown/not collected	25,881	11,997	346	13,538	8.6	11.5	23.2	7.0	100.0	46.4	1.3	52.3
Age at admission												
Under 18	145	85	13	47	*	0.1	0.9	*	100.0	58.6	9.0	32.4
18-34	94,584	29,418	386	64,780	31.5	28.1	25.8	33.3	100.0	31.1	0.4	68.5
35-54	110,795	37,572	333	72,890	36.9	35.9	22.3	37.5	100.0	33.9	0.3	65.8
55 and over	44,347	14,829	57	29,461	14.8	14.2	3.8	15.1	100.0	33.4	0.1	66.4
Unknown/not collected	50,676	22,659	705	27,312	16.9	21.7	47.2	14.0	100.0	44.7	1.4	53.9
Race/ethnicity												
White (non-Hispanic)	172,676	53,955	420	118,301	57.5	51.6	28.1	60.8	100.0	31.2	0.2	68.5
Black (non-Hispanic)	34,488	14,490	155	19,843	11.5	13.9	10.4	10.2	100.0	42.0	0.4	57.5
Hispanic	37,686	14,315	131	23,240	12.5	13.7	8.8	11.9	100.0	38.0	0.3	61.7
Asian	1,580	364	3	1,213	0.5	0.3	0.2	0.6	100.0	23.0	0.2	76.8
American Indian or Alaska												
Native	2,177	748	1	1,428	0.7	0.7	0.1	0.7	100.0	34.4	*	65.6
Native Hawaiian or other						*						
Pacific Islander	338	43		295	0.1			0.2	100.0	12.7		87.3
Two or more races	2,274	665	7	1,602	8.0	0.6	0.5	0.8	100.0	29.2	0.3	70.4
Unknown/not collected	49,328	19,983	777	28,568	16.4	19.1	52.0	14.7	100.0	40.5	1.6	57.9
Veteran status												
Veteran	9,698	3,216	19	6,463	3.2	3.1	1.3	3.3	100.0	33.2	0.2	66.6
Non-veteran	95,403	31,623	326	63,454	31.7	30.2	21.8	32.6	100.0	33.1	0.3	66.5
Unknown/not collected	195,446	69,724	1,149	124,573	65.0	66.7	76.9	64.1	100.0	35.7	0.6	63.7

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.11. Patients in continuous treatment, by facility operation: March 31, 2011

Number and percent

-				Fac	ility operation	)		
		(	Outpatient only			Other		
Length of time in continuous treatment	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
				Number of p	atients			
Number, by facility operation	300,547	165,828	103,131	19,327	1,178	4,726	2,192	4,165
0 to 90 days	36,724	21,200	10,872	1,369	941	1,523	496	323
91 to 180 days	33,139	20,503	10,387	1,363	19	444	87	336
181 to 365 days	44,223	26,153	14,742	2,289	57	511	25	446
More than 1 year but less than 2 years	49,017	28,555	16,436	2,950	37	432	10	597
2 years or longer	96,470	47,467	36,363	8,679	38	393	1,288	2,242
Unknown	40,974	21,950	14,331	2,677	86	1,423	286	221
		•	Co	olumn percent	distribution			•
Percent distribution, by length of time	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
0 to 90 days	12.2	12.8	10.5	7.1	79.9	32.2	22.6	7.8
91 to 180 days	11.0	12.4	10.1	7.1	1.6	9.4	4.0	8.1
181 to 365 days	14.7	15.8	14.3	11.8	4.8	10.8	1.1	10.7
More than 1 year but less than 2 years	16.3	17.2	15.9	15.3	3.1	9.1	0.5	14.3
2 years or longer	32.1	28.6	35.3	44.9	3.2	8.3	58.8	53.8
Unknown	13.6	13.2	13.9	13.9	7.3	30.1	13.0	5.3
			F	Row percent a	listribution			
Percent distribution, by facility operation	100.0	55.2	34.3	6.4	0.4	1.6	0.7	1.4
0 to 90 days	100.0	57.7	29.6	3.7	2.6	4.1	1.4	0.9
91 to 180 days	100.0	61.9	31.3	4.1	0.1	1.3	0.3	1.0
181 to 365 days	100.0	59.1	33.3	5.2	0.1	1.2	0.1	1.0
More than 1 year but less than 2 years	100.0	58.3	33.5	6.0	0.1	0.9	*	1.2
2 years or longer	100.0	49.2	37.7	9.0	*	0.4	1.3	2.3
Unknown	100.0	53.6	35.0	6.5	0.2	3.5	0.7	0.5

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>\*</sup> Less than 0.05 percent.

Table 3.12. Patients in continuous treatment, by treatment type and medication: March 31, 2011

Number and percent

			Leng	th of time in	continuous treat	ment	
Treatment type and medication	Total	0-90 days	91-180 days	181-365 days	More than 1 year but less than 2 years	More than 2 years	Unknown
		1	Ν	umber of pat	tients		
Number, by length of time	300,547	36,724	33,139	44,223	49,017	96,470	40,974
Treatment type	•		,	,	•	,	,
Maintenance only	104,563	10,515	11,130	14,779	15,549	34,664	17,926
Detoxification only	1,494	1,119	61	22	3		289
Both maintenance and detoxification	194,490	25,090	21,948	29,422	33,465	61,806	22,759
Medication							
Methadone only	209,758	22,712	21,656	29,911	33,210	73,691	28,578
Buprenorphine only	795	388	93	70	17	29	198
Both methadone and buprenorphine	89,514	13,539	11,263	14,061	15,736	22,717	12,198
Unknown	480	85	127	181	54	33	
		•	Colun	nn percent di	stribution		
Percent distribution, by treatment type or medication	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Treatment type							
Maintenance only	34.8	28.6	33.6	33.4	31.7	35.9	43.7
Detoxification only	0.5	3.0	0.2	*	*		0.7
Both maintenance and detoxification	64.7	68.3	66.2	66.5	68.3	64.1	55.5
Medication							
Methadone only	69.8	61.8	65.3	67.6	67.8	76.4	69.7
Buprenorphine only	0.3	1.1	0.3	0.2	0.1	*	0.5
Both methadone and buprenorphine	29.8	36.9	34.0	31.8	32.1	23.5	29.8
Unknown	0.2	0.2	0.4	0.4	0.1	*	
			Row	percent dist	ribution		
Percent distribution, by length of time	100.0	12.2	11.0	14.7	16.3	32.1	13.6
Treatment type							
Maintenance only	100.0	10.1	10.6	14.1	14.9	33.2	17.1
Detoxification only	100.0	74.9	4.1	1.5	0.2		19.3
Both maintenance and detoxification	100.0	12.9	11.3	15.1	17.2	31.8	11.7
Medication							
Methadone only	100.0	10.8	10.3	14.3	15.8	35.1	13.6
Buprenorphine only	100.0	48.8	11.7	8.8	2.1	3.6	24.9
Both methadone and buprenorphine	100.0	15.1	12.6	15.7	17.6	25.4	13.6
Unknown	100.0	17.7	26.5	37.7	11.3	6.9	

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.13. Patients in OTP maintenance, by methadone and buprenorphine dosage levels: March 31, 2011

Number and percent

						Medic	cation					
		Number o	f patients			Column pe	ercent distribu	tion		Row per	cent distributi	on
Methadone and buprenorphine dosage level	Total	Methadone	Buprenor- phine	Both metha- done and bupre- norphine	Total	Metha- done	Buprenor- phine	Both metha- done and bupre- norphine	Total	Metha- done	Buprenor- phine	Both metha- done and bupre- norphine
Methadone dosage level	255,435	177,400		78,035	100.0	100.0		100.0	100.0	69.5		30.5
Less than 40 mg	26,252	18,698		7,554	10.3	10.5		9.7	100.0	71.2		28.8
40 to 79 mg	67,237	48,667		18,570	26.3	27.4		23.8	100.0	72.4		27.6
80 to 119 mg	82,519	58,007		24,512	32.3	32.7		31.4	100.0	70.3		29.7
120 mg or more	45,070	30,632		14,438	17.6	17.3		18.5	100.0	68.0		32.0
Unknown	34,357	21,396		12,961	13.5	12.1		16.6	100.0	62.3		37.7
Buprenorphine dosage level Buprenorphine (Subutex® or generic)	3,310		258	3,052	100.0		100.0	100.0	100.0		7.8	92.2
dosage total	797		3	794	24.1		1.2	26.0	100.0		0.4	99.6
Less than 8 mg	128			128	16.1			16.1	100.0			100.0
8 to 16 mg	581		3	578	72.9		100.0	72.8	100.0		0.5	99.5
17 to 24 mg	78			78	9.8			9.8	100.0			100.0
25 to 32 mg	10			10	1.3			1.3	100.0			100.0
More than 32 mg Buprenorphine/naloxone(Suboxone®) dosage total	2,086		 169	 1,917	63.0		65.5	62.8	100.0		 8.1	 91.9
Less than 8 mg	378		47	331	18.1		27.8	17.3	100.0		12.4	87.6
8 to 16 mg	1,309		79	1,230	62.8		46.7	64.2	100.0		6.0	94.0
17 to 24 mg	303		25	278	14.5		14.8	14.5	100.0		8.3	91.7
25 to 32 mg	87		10	77	4.2		5.9	4.0	100.0		11.5	88.5
More than 32 mg	9		8	1	0.4		4.7	0.1	100.0		88.9	11.1
Unknown buprenorphine dosage total	427		86	341	12.9		33.3	11.2	100.0		20.1	79.9

<sup>- -</sup> Quantity is zero.

Table 3.14. Patients in OTP maintenance, by methadone and buprenorphine dosage levels and facility operation: March 31, 2011

Number and percent

				F	acility operati	ion		
		(	Outpatient only	<b>y</b>		Other		Dept. of
Patients receiving medication		Private for-	Private non-	Govern-	Private for-	Private non-	Govern-	Veterans
	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs
				Number	of patients	-		•
Patients receiving methadone	255,435	147,524	85,454	15,168	457	2,206	1,566	3,060
Less than 40 mg	26,252	13,866	9,448	1,802	58	258	513	307
40 to 79 mg	67,237	36,454	24,217	4,130	125	572	670	1,069
80 to 119 mg	82,519	49,254	26,995	4,272	98	622	209	1,069
120 mg or more	45,070	25,713	16,458	2,130	40	285	14	430
Unknown	34,357	22,237	8,336	2,834	136	469	160	185
Patients receiving buprenorphine	3,310	1,587	1,051	189	65	79	40	299
Patients receiving buprenorphine (Subutex® or generic)	797	544	236	3	9	2		3
Less than 8 mg	128	113	15					
8 to 16 mg	581	370	197	1	9	1		3
17 to 24 mg	78	57	19	2				
25 to 32 mg	10	4	5			1		
More than 32 mg								
Patients receiving buprenorphine/naloxone (Suboxone®)	2,086	767	776	100	56	77	37	273
Less than 8 mg	378	195	91	11	4	46	7	24
8 to 16 mg	1,309	424	565	38	48	29	28	177
17 to 24 mg	303	110	105	33		2	2	51
25 to 32 mg	87	38	15	10	4			20
More than 32 mg	9			8				1
Unknown	427	276	39	86			3	23
			(	Column perc	ent distributio	n		
Patients receiving methadone	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Less than 40 mg	10.3	9.4	11.1	11.9	12.7	11.7	32.8	10.0
40 to 79 mg	26.3	24.7	28.3	27.2	27.4	25.9	42.8	34.9
80 to 119 mg	32.3	33.4	31.6	28.2	21.4	28.2	13.3	34.9
120 mg or more	17.6	17.4	19.3	14.0	8.8	12.9	0.9	14.1
Unknown	13.5	15.1	9.8	18.7	29.8	21.3	10.2	6.0
Patients receiving buprenorphine	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Patients receiving buprenorphine (Subutex® or generic)	24.1	34.3	22.5	1.6	13.8	2.5		1.0
Less than 8 mg	16.1	20.8	6.4					
8 to 16 mg	72.9	68.0	83.5	33.3	100.0	50.0		100.0
17 to 24 mg	9.8	10.5	8.1	66.7				
25 to 32 mg	1.3	0.7	2.1			50.0		
More than 32 mg								
Continued. See notes at end of table.								

Table 3.14. Patients in OTP maintenance, by methadone and buprenorphine dosage levels and facility operation: March 31, 2011 (continued)

Number and percent

				F	acility operati	ion		
Patients receiving medication			Outpatient only			Other		5
ratients receiving medication		Private for-	Private non-	Govern-	Private for-	Private non-	Govern-	Dept. of Veterans
	Total	profit	profit	ment 1	profit	profit	ment 1	Affairs
	7 010.	,			ent distributio			7
Patients receiving buprenorphine/naloxone (Suboxone®)	63.0	48.3	73.8	52.9	86.2	97.5	92.5	91.3
Less than 8 mg	18.1	25.4	11.7	11.0	7.1	59.7	18.9	8.8
8 to 16 mg	62.8	55.3	72.8	38.0	85.7	37.7	75.7	64.8
17 to 24 mg	14.5	14.3	13.5	33.0		2.6	5.4	18.7
25 to 32 mg	4.2	5.0	1.9	10.0	7.1			7.3
More than 32 mg	0.4			8.0				0.4
Unknown	12.9	17.4	3.7	45.5			7.5	7.7
		•		Row perce	nt distribution			•
Patients receiving methadone	100.0	57.8	33.5	5.9	0.2	0.9	0.6	1.2
Less than 40 mg	100.0	52.8	36.0	6.9	0.2	1.0	2.0	1.2
40 to 79 mg	100.0	54.2	36.0	6.1	0.2	0.9	1.0	1.6
80 to 119 mg	100.0	59.7	32.7	5.2	0.1	8.0	0.3	1.3
120 mg or more	100.0	57.1	36.5	4.7	0.1	0.6	*	1.0
Unknown	100.0	64.7	24.3	8.2	0.4	1.4	0.5	0.5
Patients receiving buprenorphine or								
buprenorphine/naloxone	100.0	47.9	31.8	5.7	2.0	2.4	1.2	9.0
Patients receiving buprenorphine (Subutex® or generic)	100.0	68.3	29.6	0.4	1.1	0.3		0.4
Less than 8 mg	100.0	88.3	11.7					
8 to 16 mg	100.0	63.7	33.9	0.2	1.5	0.2		0.5
17 to 24 mg	100.0	73.1	24.4	2.6				
25 to 32 mg	100.0	40.0	50.0			10.0		
More than 32 mg								
Patients receiving buprenorphine/naloxone (Suboxone®)	100.0	36.8	37.2	4.8	2.7	3.7	1.8	13.1
Less than 8 mg	100.0	51.6	24.1	2.9	1.1	12.2	1.9	6.3
8 to 16 mg	100.0	32.4	43.2	2.9	3.7	2.2	2.1	13.5
17 to 24 mg	100.0	36.3	34.7	10.9		0.7	0.7	16.8
25 to 32 mg	100.0	43.7	17.2	11.5	4.6			23.0
More than 32 mg	100.0			88.9				11.1
Unknown	100.0	64.6	9.1	20.1			0.7	5.4

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.15. Patients in OTP maintenance, by methadone and buprenorphine dosage levels and treatment type: March 31, 2011

Number and percent

						Treatm	ent type					
		Number o	f patients			Column per	cent distribu	ution		Row perce	ent distributi	on
Patients receiving medication	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detoxi- fication	Total	Main- tenance only	Detoxi- fication only	Both main- tenance and detoxi- fication
Patients receiving methadone	255,435	88,595	23	166,817	100.0	100.0	100.0	100.0	100.0	34.7	*	65.3
Less than 40 mg	26,252	9,468	4	16,780	10.3	10.7	17.4	10.1	100.0	36.1	*	63.9
40 to 79 mg	67,237	23,064	6	44,167	26.3	26.0	26.1	26.5	100.0	34.3	*	65.7
80 to 119 mg	82,519	30,400	5	52,114	32.3	34.3	21.7	31.2	100.0	36.8	*	63.2
120 mg or more	45,070	15,469	1	29,600	17.6	17.5	4.3	17.7	100.0	34.3	*	65.7
Unknown	34,357	10,194	7	24,156	13.5	11.5	30.4	14.5	100.0	29.7	*	70.3
Patients receiving buprenorphine or buprenorphine/naloxone	3,310	795	20	2,495	100.0	100.0	100.0	100.0	100.0	24.0	0.6	75.4
Patients receiving buprenorphine (Subutex® or generic)	797	49		748	24.1	6.2		30.0	100.0	6.1		93.9
Less than 8 mg	128	14		114	16.1	28.6		15.2	100.0	10.9		89.1
8 to 16 mg	581	30		551	72.9	61.2		73.7	100.0	5.2		94.8
17 to 24 mg	78	4		74	9.8	8.2		9.9	100.0	5.1		94.9
25 to 32 mg	10	1		9	1.3	2.0		1.2	100.0	10.0		90.0
More than 32 mg												
Patients receiving buprenorphine/												
naloxone (Suboxone®)	2,086	550	20	1,516	63.0	69.2	100.0	60.8	100.0	26.4	1.0	72.7
Less than 8 mg	378	90	13	275	18.1	16.4	65.0	18.1	100.0	23.8	3.4	72.8
8 to 16 mg	1,309	335	6	968	62.8	60.9	30.0	63.9	100.0	25.6	0.5	73.9
17 to 24 mg	303	96	1	206	14.5	17.5	5.0	13.6	100.0	31.7	0.3	68.0
25 to 32 mg	87	21		66	4.2	3.8		4.4	100.0	24.1		75.9
More than 32 mg	9	8		1	0.4	1.5		0.1	100.0	88.9		11.1
Unknown	427	196		231	12.9	24.7		9.3	100.0	45.9		54.1

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.16. Patients receiving methadone and buprenorphine, by reason for medication and facility operation:

March 31, 2011

Number and percent

				Fa	cility operati			
A.A. dia atian			Outpatient only	/		Other		
Medication	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Dept. of Veterans Affairs
				Number of	patients			,
Methadone								
Total	268,208	151,563	89,880	17,691	732	3,299	1,851	3,192
Patients receiving for maintenance	255,435	147,524	85,454	15,168	457	2,206	1,566	3,060
Patients receiving for detoxification	8,719	3,738	1,306	2,523	275	570	215	92
Unknown	4,054	301	3,120			523	70	40
Buprenorphine								
Total	3,833	1,660	1,146	258	139	204	84	342
Patients receiving for maintenance	3,310	1,587	1,051	189	65	79	40	299
Patients receiving for detoxification	397	73	42	1	74	120	44	43
Unknown	126		53	68		5		
		•	Co	olumn perce	nt distributio	n		4
Methadone								
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Patients receiving for maintenance	95.2	97.3	95.1	85.7	62.4	66.9	84.6	95.9
Patients receiving for detoxification	3.3	2.5	1.5	14.3	37.6	17.3	11.6	2.9
Unknown	1.5	0.2	3.5			15.9	3.8	1.3
Buprenorphine								
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Patients receiving for maintenance	86.4	95.6	91.7	73.3	46.8	38.7	47.6	87.4
Patients receiving for detoxification	10.4	4.4	3.7	0.4	53.2	58.8	52.4	12.6
Unknown	3.3		4.6	26.4		2.5		
		•	ŀ	Row percent	distribution			-
Methadone								
Total	100.0	56.5	33.5	6.6	0.3	1.2	0.7	1.2
Patients receiving for maintenance	100.0	57.8	33.5	5.9	0.2	0.9	0.6	1.2
Patients receiving for detoxification	100.0	42.9	15.0	28.9	3.2	6.5	2.5	1.1
Unknown	100.0	7.4	77.0			12.9	1.7	1.0
Buprenorphine								
Total	100.0	43.3	29.9	6.7	3.6	5.3	2.2	8.9
Patients receiving for maintenance	100.0	47.9	31.8	5.7	2.0	2.4	1.2	9.0
Patients receiving for detoxification	100.0	18.4	10.6	0.3	18.6	30.2	11.1	10.8
Unknown	100.0		42.1	54.0		4.0		

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

Table 3.17. Patients receiving methadone and burpenorphine, by treatment type and reason for medication: March 31, 2011

**Number and percent** 

		111	umber and	percent									
					Number of	patients							
	_	R	eceiving met	hadone for		Rec	eiving bupr	enorphine	for:				
Treatment type and medication	•												
			Main-	Detoxi-	Un-		Main-	Detoxi-	Un-				
		Total	tenance	fication	known	Total	tenance	fication	known				
			•		Number of	patients	•						
	Total	268,208	255,435	8,719	4,054	3,833	3,310	397	126				
Treatment type													
Maintenance only		92,314	88,595	460	3,259	908	795	60	53				
Detoxification only		634	23	611		205	20	185					
Both maintenance and detoxification		175,260	166,817	7,648	795	2,720	2,495	152	73				
Medication													
Methadone only		187,871	177,400	6,457	4,014								
Buprenorphine only						398	258	140					
Both methadone and buprenorphine		80,337	78,035	2,262	40	3,435	3,052	257	126				
	_		Column percent distribution										
	Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0				
Treatment type													
Maintenance only		34.4	34.7	5.3	80.4	23.7	24.0	15.1	42.1				
Detoxification only		0.2	*	7.0		5.3	0.6	46.6					
Both maintenance and detoxification		65.3	65.3	87.7	19.6	71.0	75.4	38.3	57.9				
Medication													
Methadone only		70.0	69.5	74.1	99.0								
Buprenorphine only						10.4	7.8	35.3					
Both methadone and buprenorphine	_	30.0	30.5	25.9	1.0	89.6	92.2	64.7	100.0				
				Ro	ow percent	distribution							
	Total	100.0	95.2	3.3	1.5	100.0	86.4	10.4	3.3				
Treatment type													
Maintenance only		100.0	96.0	0.5	3.5	100.0	87.6	6.6	5.8				
Detoxification only		100.0	3.6	96.4		100.0	9.8	90.2					
Both maintenance and detoxification		100.0	95.2	4.4	0.5	100.0	91.7	5.6	2.7				
Medication													
Methadone only		100.0	94.4	3.4	2.1								
Buprenorphine only						100.0	64.8	35.2	0.0				
Both methadone and buprenorphine		100.0	97.1	2.8	0.0	100.0	88.9	7.5	3.7				

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.18. Patients receiving methadone for 2 or more years, by take-home doses of methadone and facility operation: March 31, 2011

Number and percent

				F	acility operation	on		
Take home dages of mostles days			Outpatient only	/		Other		Dept. of
Take-home doses of methadone	Total	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Private for-profit	Private non-profit	Govern- ment <sup>1</sup>	Veterans Affairs
				Number (	of patients			
Number, by facility operation	99,934	49,285	37,361	9,244	155	495	1,373	2,021
None	24,931	10,341	9,884	3,131	5	80	1,179	311
1-7 days	45,242	22,436	18,352	3,153		281	104	916
8-14 days	13,053	8,013	3,926	567		58	7	482
15-30 days	6,274	4,032	1,816	242		26		158
Unknown	10,434	4,463	3,383	2,151	150	50	83	154
				Column perce	ent distributioi	า		
Percent distribution, by take-home doses	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
None	24.9	21.0	26.5	33.9	3.2	16.2	85.9	15.4
1-7 days	45.3	45.5	49.1	34.1		56.8	7.6	45.3
8-14 days	13.1	16.3	10.5	6.1		11.7	0.5	23.8
15-30 days	6.3	8.2	4.9	2.6		5.3		7.8
Unknown	10.4	9.1	9.1	23.3	96.8	10.1	6.0	7.6
				Row percer	nt distribution			
Percent distribution, by facility operation	100.0	49.3	37.4	9.3	0.2	0.5	1.4	2.0
None	100.0	41.5	39.6	12.6	*	0.3	4.7	1.2
1-7 days	100.0	49.6	40.6	7.0		0.6	0.2	2.0
8-14 days	100.0	61.4	30.1	4.3		0.4	0.1	3.7
15-30 days	100.0	64.3	28.9	3.9		0.4		2.5
Unknown	100.0	42.8	32.4	20.6	1.4	0.5	0.8	1.5

<sup>&</sup>lt;sup>1</sup> Government includes state government; local, county, or community government; and Tribal government. All federal facilities were under the Department of Veterans Affairs.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

Table 3.19. Patients receiving methadone for 2 or more years, by take-home doses of methadone and treatment type: March 31, 2011

Number and percent

			Take-hor	ne doses of me	ethadone	
Treatment type						
	Total	1-7 days	8-14 days	15-30 days	None	Unknown
		•	Number o	of patients		
Number, by take-home doses	99,934	45,242	13,053	6,274	24,931	10,434
Maintenance only	35,292	17,208	4,393	1,669	8,158	3,864
Detoxification only <sup>1</sup>	14	5			6	3
Both maintenance and detoxification	64,628	28,029	8,660	4,605	16,767	6,567
			Column perce	ent distribution		
Percent distribution, by treatment type	100.0	100.0	100.0	100.0	100.0	100.0
Maintenance only	35.3	38.0	33.7	26.6	32.7	37.0
Detoxification only	*	*			*	*
Both maintenance and detoxification	64.7	62.0	66.3	73.4	67.3	62.9
			Row percei	nt distributon		
Percent distribution, by take-home doses	100.0	45.3	13.1	6.3	24.9	10.4
Maintenance only	100.0	48.8	12.4	4.7	23.1	10.9
Detoxification only	100.0	35.7			42.9	21.4
Both maintenance and detoxification	100.0	43.4	13.4	7.1	25.9	10.2

<sup>&</sup>lt;sup>1</sup> According to regulation (42CFR Part 8.12(i)(4)), take-home privileges are not permitted to patients in short-term detoxification or interim maintenance. These five patients who were reported as receiving take-home doses under detoxification-only service were from two OTPs. These OTPs have changed service types several times over the past few years. Although we were not able to determine conclusively, it is assumed that its patients were in an OTP that changed their service type from detoxification-only to both maintenance and detoxification services during the survey fielding period and received a take-home dose when the OTP program was in the process of changing their service type from detoxification-only to both maintenance and detoxification services.

<sup>- -</sup> Quantity is zero.

<sup>\*</sup> Less than 0.05 percent.

#### APPENDIX A

#### 2011 OPIOID TREATMENT PROGRAM (OTP) QUESTIONNAIRE

#### AND

# NATIONAL SURVEY OF SUBSTANCE ABUSE TREATMENT SERVICES (N-SSATS) QUESTIONNAIRE

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)

MARCH 31, 2011

# 2011 Opioid Treatment Program (OTP) Questionnaire

March 31, 2011

Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)

PLEASE REVIEW THE INFORMATION BELOW.

CROSS OUT ANY ERRORS AND ENTER THE CORRECT INFORMATION.

#### PLEDGE TO RESPONDENTS

The information you provide will be protected to the fullest extent allowable under the Public Health Service Act, 42 USC Sec 501(n). This law permits the public release of identifiable information about an establishment only with the consent of that establishment and limits the use of the information to the purposes for which it was supplied. Responses to questions will be published only in statistical summaries so that individual treatment facilities cannot be identified.



## PLEASE READ THIS ENTIRE PAGE BEFORE COMPLETING THE QUESTIONNAIRE

#### Would you prefer to complete this questionnaire online?

See the neon green flyer enclosed in your questionnaire packet for the Internet address and your unique user ID and password. As with the N-SSATS survey, you can log on and off the website as often as needed to complete the questionnaire. When you log on again, the program will take you to the next unanswered question. If you need more information, call the OTP Survey helpline at 1-888-324-8337.

#### **INSTRUCTIONS**

Many of the questions in this survey ask about "this Opioid Treatment Program (OTP)." By "this OTP" we mean the specific opioid treatment program whose name and location are printed on the front cover. If this OTP is part of a larger facility, report <u>only</u> about the services and activities at this OTP. If you have any questions about how "this OTP" applies to your facility, please call 1-888-324-8337.

Return the completed questionnaire in the envelope provided. Please keep a copy for your records.

For additional information about this survey, please visit http://info.nssats.com.

If you have any questions please contact:

MATHEMATICA POLICY RESEARCH 1-888-324-8337 or NSSATSWeb@mathematica-mpr.com

# SECTION A OPIOID TREATMENT PROGRAM SERVICES AND CHARACTERISTICS

Opi loca part	oid <sup>-</sup> ation t of a	A asks about services and characteristics of this Treatment Program (OTP), that is, the OTP at the listed on the cover of this survey. If this OTP is a larger facility, report only about the services and at this OTP.	A4.			greement (as	。
A1. A1a.	1	his facility currently a SAMHSA-certified Opioid eatment Program (OTP)?  Yes  No, but was on March 31, 2011  SKIP TO B1 (PAGE 4)  No, but was prior to March 31, 2011  Never a SAMHSA-certified OTP SKIP TO B7 (PAGE 6)  his OTP, at this location, normally scheduled to open 365 days a year?  Yes	A5.	health service p store, or otherw  1 Yes  0 No  For each day of number of scheen  Column A – For buprenorphine (Sbuprenorphine/na)  Column B – For If not scheduling	the week, recorduled daily hou dispensing methodoxone (Suboxo counseling.	eive, process, ient records?  To this OTP's rs  Tadone, eric) or ne®).	urs
A2.	Do and pat to a	es this OTP have a plan or an agreement with other provider to provide continuity of care for ients during service disruptions, whether due a major disaster or more routine event, such as nowstorm?		Days of Week Monday Tuesday	Column A Total Number of Scheduled Hours for Dispensing Medication	Column B  Total Number of Scheduled Hours for Counseling	
A2a.	o □ Wit	Yes No → SKIP TO A3 (TOP OF NEXT COLUMN)  th which of the following providers does this P have such a plan or agreement?		Wednesday Thursday Friday			
	1.	MARK "YES" OR "NO" FOR EACH <u>YES</u> NO  A hospital 1 □ 0 □		Saturday Sunday			
	2. 3. 4.	Another OTP	A6.	-	·	YES N	ACH IO

A3.

Does this OTP have a formal agreement for

Center (FQHC).....1

2. A hospital ...... 1 🗆

MARK "YES" OR "NO" FOR EACH

<u>YES</u>

<u>NO</u>

0  $\square$ 

0 🗆

medical referral purposes with...

1. A Federally Qualified Health

A7.	This question asks about screening and
	diagnostic tests provided at this OTP.

**Column A** – For which of these conditions does this OTP <u>routinely screen</u>? Consider all screening performed at intake, assessment or admission.

**Column B** – For which of these conditions does this OTP <u>perform diagnostic tests</u>? Consider all testing performed as medically appropriate.

		Colu	MN A	Colu	MN B
HEALTH CONDITION		ROUTINELY SCREEN		PERFORM DIAGNOSTIC TESTS	
		<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
1.	Diabetes	1 🗆	0 🗆	1 🗆	о 🗆
2.	Hepatitis C	1 🗆	о 🗆	1 🗆	0 🗆
3.	HIV/AIDS	1 🗆	0 🗆	1 🗆	0 🗆
4.	Hypertension (high blood pressure)	1 🗆	0 🗆	1 🗆	o 🗆
5.	Pregnancy	1 🗆	0 🗆	1 🗆	0 🗆
6.	Heartbeat abnormalities	1 🗆	0 🗆	1 🗆	o 🗆
7.	Sexually transmitted infections (STIs, including gonorrhea, syphilis)	1 🗆	0 🗆	1 🗆	o 🗆
8.	Sleep apnea	1 🗆	0 🗆	1 🗆	о 🗆
9.	Alcohol use	1 🗆	o 🗆	1 🗆	o 🗆
10.	Tobacco use	1 🗆	0 🗆	1 🗆	o 🗆

A8.	Does this OTP routinely test for any of the
	following drugs at admission?

MARK "YES" OR "NO" FOR EACH

	<u>YES</u>	<u>NO</u>
1.	Marijuana 1 🗆	0 🗆
2.	Cocaine1	0 🗆
3.	Benzodiazepines 1 🗆	0 🗆
4.	Heroin1 🗆	0 🗆
5.	Prescription opioids	0 🗆
6.	Methamphetamines 1 $\square$	0 🗆
7.	Other stimulants (Please specify: 1 $\square$	0 🗆
		)

### A9. For each of the listed psychiatric conditions, please indicate if this OTP...

**Column A** – Routinely screens for the condition.

**Column B** – Provides treatment involving medication.

**Column C** – Provides treatment involving counseling therapy.

	Colu	<u>ми А</u>	Colu	MN B	Colu	MN C
PSYCHIATRIC CONDITION		INELY EENS	TREATMENT INVOLVING MEDICATION		TREATMENT INVOLVING COUNSELING	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Anxiety/Panic disorder	1 🗆	o 🗆	1 🗆	0 🗆	1 🗆	o 🗆
2. Bipolar disorder	1 🗆	0 🗆	1 🗆	0 🗆	1 🗆	o 🗆
3. Depression	1 🗆	0 🗆	1 🗆	o 🗆	1 🗆	o 🗆
Post traumatic stress disorder	1 🗆	o 🗆	1 🗆	0 🗆	1 🗆	о 🗆
5. Schizophrenia	1 🗆	0 🗆	1 🗆	0 🗆	1 🗆	o 🗆
6. Other (Specify below:	1 🗆	o 🗆	1 🗆	o 🗆	1 🗆	о 🗆
						)

A10.	This question concerns the clinical staff providing
	patient services at this OTP in a typical week.

Please count a staff member in one category only.

- **Column A** Please record <u>total number</u> of people employed at this OTP.
- Column B Please record total hours worked for this category in a typical week. For example, if this OTP has 2 physicians who each average about 15 hours per week, you should report 30 hours in Column B.

CL	INICAL STAFF	COLUMN A  TOTAL NUMBER EMPLOYED AT THIS OTP (IF NONE, ENTER "0")	COLUMN B  TOTAL STAFF HOURS IN A TYPICAL WEEK
1.	Physician (MD, DO, Psychiatrist, etc.)		
2.	Registered Nurse (RN)		
3.	Licensed Practical Nurse (LPN)		
4.	Mid-level medical personnel (Nurse Practitioner, PA, APRN, etc.)		
5.	Pharmacist		
6.	Doctoral level counselor (Psychologist, etc.)		
7.	Masters level counselor (MSW, etc.)		
8.	Other degreed counselor (BA, BS)		
9.	Associate degree or non degreed counselor		

#### A11. For clinical management, does this OTP...

MARK "YES" OR "NO" FOR EACH

0 🗆

YES NO

1. Use in-house or proprietary software (software that was created for, or modified specifically for, this OTP or facility)? ....... 1 □ □ □

2. Use commercially-available software

that has not been modified specifically for this OTP or facility? ...... 1 0 0

3. Use a paper system only (no computer/ electronic clinical management)? ...... ₁ □

A12. For each of the following activities, please indicate if staff members <u>routinely</u> use computer or electronic resources, paper only, or a combination of both to accomplish their work...

or both to accomplish their work						
	MARK ONE METHOD FOR EACH ACTIVIT					
Work Activity		COMPUTER/ ELECTRONIC ONLY	Paper Only	BOTH ELECTRONIC AND PAPER		
1.	Intake	1 🗆	2 🗆	з 🗆		
2.	Assessment	1 🗆	2 🗆	з 🗆		
3.	Treatment plan	1 🗆	2 □	3 □		
4.	Discharge	1 🗆	2 🗆	з 🗆		
5.	Referrals	1 🗆	2 🗆	3 🗆		
6.	Issue/Receive lab results	1 🗆	2 🗆	3 🗆		
7.	Billing	1 🗆	2 🗆	з 🗆		
8.	Outcomes management	1 🗆	2 🗆	з 🗆		
9.	Medication dispensing	1 🗆	2 🗆	3 □		
A13. Do computers at this OTP have the capability to access the Internet?						
A13a	a. Does this OT using	P <u>primarily</u> a	ccess the In	ternet		
	₁ □ A regular	· "dial-up" tele	phone line			
	wireless	DSL, cable modem, fiber optics, satellite, wireless (such as Wi-Fi) or some other broadband Internet connection?				
	₃ ☐ Somethir	Something else? (Specify below:				
A14.	Do any outpa each way, to			nore,		
	₁□ Yes					
	□ No					
	n ☐ Not applicable, no outpatient OTP patients					

# SECTION B: OTP PATIENT CHARACTERISTICS

For this survey, an OTP patient is a person who has been admitted to this OTP and who receives methadone or buprenorphine.

**QUESTION B1** REFERS ONLY TO NEW PATIENTS ADMITTED TO THIS OTP IN 2010.

B1. <u>During the 2010 calendar year</u>, how many new patients were admitted to this OTP?

ENTER A NUMBER (IF NONE, ENTER "0")

2010 CALENDAR YEAR TOTAL BOX

Questions B2 – B6 ask about ALL patients in treatment at this OTP on March 31, 2011.

B2. On March 31, 2011, how many patients were in treatment at this OTP?

ENTER A NUMBER (IF NONE, ENTER "0" AND SKIP TO B7)

MARCH 31, 2011 TOTAL BOX



B3. On March 31, 2011, how many of these OTP patients were...

**GENDER** 

Each category total should equal the number reported in the TOTAL BOX in B2.

ENTER THE NUMBER OF PATIENTS IN EACH CATEGORY (IF NONE, ENTER "0")

Male	
Female	
Other, unknown or not collected	
GENDER TOTAL: (Should=B2)	
AGE	
Under 18	
18-34	
35-54	
55 and over	
Unknown or not collected	
AGE TOTAL: (Should=B2)	
RACE & ETHNICITY	
White	
Black	
Hispanic	
Asian	
American Indian or Alaska Native	
Native Hawaiian or Other Pacific Islander	
Two or more races	
Unknown or not collected	
RACE & ETHNICITY TOTAL: (Should=B2)	
VETERAN STATUS	
Veteran	
Non Veteran	
Unknown or not collected	
VETERAN TOTAL: (Should=B2)	

D4.	how many had been in treatment continuously at this OTP for	<b>D</b> 30.		methadone <u>for 2 years or more</u> ?		
	ENTER THE NUMBER OF PATIENTS (IF NONE, ENTER "0")			ENTER A NUMBER (IF NONE, ENTER "0" AND SKIP TO B6)		
	0-90 days		_	R RECEIVING HADONE FOR		
	91-180 days			RS OR MORE		
	181-365 days					
	More than 1 year to less than 2 years	B5d.		itients in B5c, how many receive <u>take-</u>		
	2 years or longer		home do	ses for the following number of days		
	TOTAL (Should = B2)	NUME OF DA		ENTER THE NUMBER OF PATIENTS (IF NONE, ENTER "0")		
		0 day	s (did not	receive take-home doses)		
B5.	How many of the patients in treatment on	1-7 d	lays			
	March 31, 2011, were dispensed methadone?	8-14 days				
	☐ ← DO NOT DISPENSE METHADONE AT THIS OTP, SKIP TO B6	15-30	0 days			
	ENTER A NUMBER (IF NONE, ENTER "0" AND SKIP TO B6)	Tota	al Receiving	Methadone for 2 years or more (Should = B5c)		
	NUMBER DISPENSED METHADONE					
B5a.	Of these patients, how many were receiving methadone for	B6.	March 31 (Subutex	y of the patients in treatment on , 2011, received <u>buprenorphine</u> <u>® or generic) or buprenorphine/</u> <u>e (Suboxone®</u> )?		
	ENTER THE NUMBER OF PATIENTS (IF NONE, ENTER "0")		BUF	NOT PRESCRIBE OR DISPENSE PRENORPHINE AT THIS		
	Maintenance		OH	P, SKIP TO B7		
	Detoxification			ENTER A NUMBER (IF NONE, ENTER "0"		
	Total Receiving Methadone (Should = B5)	E	BU	AND SKIP TO B7)  UMBER RECEIVED PRENORPHINE OR PHINE/NALOXONE		
B5b.	How many methadone maintenance patients in B5a were receiving methadone doses of					
	ENTER THE NUMBER OF PATIENTS (IF NONE, ENTER "0")	B6a.		patients, how many were receiving phine for		
	Less than 40 mg.			ENTER THE NUMBER OF PATIENTS		
	40 to 79 mg.			(IF NONE, ENTER "0")		
	80 to 119 mg.		Mainten	ance		
	120 mg. or above		Detoxific			
	Total Receiving Methadone (Should = the number of maintenance patients in B5a)		Total	Receiving Buprenorphine (Should = B6)		
1		i				

#### B6b. How many buprenorphine maintenance patients in B6a were receiving buprenorphine doses of...

	ENTER THE NUMBER OF PATIENTS (IF NONE, ENTER "0"	
Dosage	BUPRENORPHINE (SUBUTEX® OR GENERIC)	BUPRENORPHINE/NALOXONE (SUBOXONE®)
Less than 8 mg.		
8 to 16 mg.		
17 to 24 mg.		
25 to 32 mg.		
More than 32 mg.		
TOTAL RECEIVING BUPRENORPHINE  (Together should = B6a1)		

#### B7. Who was primarily responsible for completing this form?

Name:	
	() –
Fax Number:	(
Email Address:	

#### **B8. PLEASE INDICATE ANY COMMENTS**

Thank you for your participation. Please return this questionnaire in the envelope provided. If you no longer have the envelope, please mail this questionnaire to:

#### MATHEMATICA POLICY RESEARCH

ATTN: RECEIPT CONTROL - Project 06667-OTP P.O. Box 2393 Princeton, NJ 08543-2393

Public burden for this collection of information is estimated to average 50 minutes per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to SAMHSA Reports Clearance Officer, Room 8-1099, 1 Choke Cherry Road, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB number for this project is 0930-0319.

FORM APPROVED:

OMB No. 0930-0106 APPROVAL EXPIRES: 12/31/2012 See OMB burden statement on last page

## National Survey of Substance Abuse Treatment Services (N-SSATS)

March 31, 2011

Substance Abuse and Mental Health Services Administration (SAMHSA)

PLEASE REVIEW THE FACILITY INFORMATION PRINTED ABOVE.
CROSS OUT ERRORS AND ENTER CORRECT OR MISSING INFORMATION.

CHECK ONE

- Information is complete and correct, no changes needed
- All missing or incorrect information has been corrected

Would you prefer to complete this questionnaire online? See the pink flyer enclosed in your questionnaire packet for the Internet address and your unique user ID and password. You can log on and off the website as often as needed to complete the questionnaire. When you log on again, the program will take you to the next unanswered question. If you need more information, call the N-SSATS helpline at 1-888-324-8337.

#### **INSTRUCTIONS**

Most of the questions in this survey ask about "this facility." By "this facility" we mean the specific treatment facility or program whose name and location are printed on the front cover. If you have any questions about how the term "this facility" applies to your facility, please call 1-888-324-8337.
Please answer ONLY for the specific facility or program whose name and location are printed on the front cover, unless otherwise specified in the questionnaire.
If the questionnaire has not been completed online, return the completed questionnaire in the envelope provided. Please keep a copy for your records.
For additional information about this survey and definitions of some of the terms used, please visit our website at http://info.nssats.com.
If you have any questions or need additional blank forms, contact:
MATHEMATICA POLICY RESEARCH

MATHEMATICA POLICY RESEARCH 1-888-324-8337 NSSATSWeb@mathematica-mpr.com

#### IMPORTANT INFORMATION

\* <u>Asterisked questions</u>. Information from asterisked (\*) questions will be published in SAMHSA's *National Directory of Drug and Alcohol Abuse Treatment Programs* and will be available online at <a href="http://findtreatment.samhsa.gov">http://findtreatment.samhsa.gov</a>, SAMHSA's Substance Abuse Treatment Facility Locator.

<u>Mapping feature in Locator</u>. Complete and accurate name and address information is needed for the online Treatment Facility Locator so it can correctly map the facility location.

**Eligibility for Directory/Locator**. Only facilities designated as eligible by their state substance abuse office will be listed in the *National Directory* and online Treatment Facility Locator. Your state N-SSATS representative can tell you if your facility is eligible to be listed in the Directory/Locator. For the name and telephone number of your state representative, call the N-SSATS helpline at 1-888-324-8337.

# SECTION A: FACILITY CHARACTERISTICS

Section A asks about characteristics of individual facilities and should be completed for this facility only, that is, the treatment facility or program at the location listed on the front cover.

aı	Which of the following substance abuse services are offered by this facility <u>at this location</u> , that is, the location listed on the front cover?					
	MARK "YES" OR "NO" FOR	EAC				
	<u>YES</u>	<u>N</u> (				
1.	Intake, assessment, or referral 1 $\square$	ο [				
2.	Detoxification 1	ο [				
3.	Substance abuse treatment (services that focus on initiating and maintaining an individual's recovery from substance abuse and on averting relapse)	о [				
4.	Any other substance abuse services1	о [				
Did you answer "yes" to <u>detoxification</u> in optior of question 1 above?  -1 □ Yes						
_	f question 1 above?	ion :				
<b>—</b> 1[	f question 1 above?					
1 [ 0 [	f question 1 above? □ Yes					
1 [ 0 [	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COL	.UM				
1 [ 0 [	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COLoes this facility detoxify clients from	.UM				
1 [ 0 [	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COLoes this facility detoxify clients from  MARK "YES" OR "NO" FOR ITES	.UM EAC				
1 [ o [ <b>D</b>	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COL  oes this facility detoxify clients from  MARK "YES" OR "NO" FOR I  YES  Alcohol	.UM EAC N(				
	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COLoes this facility detoxify clients from  MARK "YES" OR "NO" FOR IT YES  Alcohol	.UM EAC N() o [				
	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COLoes this facility detoxify clients from  MARK "YES" OR "NO" FOR IT YES  Alcohol	.UM				
	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COL  oes this facility detoxify clients from  MARK "YES" OR "NO" FOR I  YES  Alcohol	• [				
	f question 1 above?  ☐ Yes ☐ No → SKIP TO Q.3 (TOP OF NEXT COL  oes this facility detoxify clients from  MARK "YES" OR "NO" FOR I  YES  Alcohol	EAC N(0 0 [ 0 [ 0 0 [				

→ SKIP TO Q.4 (NEXT COLUMN)

1 🔲

0 🗆

No .

3.	in option 3 of question 1?						
	1 🗆	Yes					
	0 🗆	No → SKIP TO Q.34 (PAGE 11)					
<b>∀</b> *4.	What is the <u>primary</u> focus of this facility <u>at this</u> <u>location</u> , that is, the location listed on the front cover?						
	MARK ONE ONLY						
	1 🗆	Substance abuse treatment services					
	2 🗆	Mental health services					
	₃ ☐ Mix of mental health and substance abuse treatment services (neither is primary)						
	4 🔲	General health care					
	5 🗆	Other (Specify:)					
5.	Is this facility operated by						
	MARK	ONE ONLY					
	1 🗆	A private for-profit organization SKIP TO Q.6					
	2 🗆	A private non-profit organization (BELOW)					
	з 🗆	State government					
	4 🗆	Local, county, or community government SKIP TO Q.8 (PAGE 2)					
	5 🗆	Tribal government ————					
	6 🗆	Federal Government					
<b>V</b> 5a.	Whic	h Federal Government agency?					
	MARK	ONE ONLY					
	1 🗆	Department of Veterans Affairs					
	2 🗆	Department of Defense SKIP TO   → Q.8					
	з 🗆	Indian Health Service (PAGE 2)					
	4 🗆	Other (Specify:)					
6.	Is this facility a solo practice, meaning, an office with only one independent practitioner or counselor?						
	1 🗆	Yes					
	0 🗆	No					

7.	Is this facility affiliated with a religious organization?	7 🗆	admission is not possible	
	1□ Yes		ing (Include tests performed at this location,	
	∘ □ No		if specimen is sent to an outside source for nical analysis.)	
8.	Is this facility a jail, prison, or other organization that provides treatment <u>exclusively</u> for incarcerated persons or juvenile detainees?	8	Breathalyzer or other blood alcohol testing Drug or alcohol urine screening Screening for Hepatitis B Screening for Hepatitis C HIV testing	
	1 ☐ Yes → SKIP TO Q.41 (PAGE 11)	13 🗆 14 🗖	STD testing TB screening	
_	₀□ No I	14 🗀	1 B 30/00/ming	
		Tran	sitional Services	
<b>∀</b> 9.	Is this facility a hospital or located in or operated by a hospital?	15 🗆 16 🗖	Discharge planning Aftercare/continuing care	
	ı₁□ Yes	Anci	Ilary Services	
	₀ □ No → SKIP TO Q.10 (BELOW)	17 🗆	Case management services	
	NO > SKIP TO Q. TO (BELOW)	18 🗆	Social skills development	
$\downarrow$		19 🗖	Mentoring/peer support	
9a.	What type of hospital?	20 🗆	Child care for clients' children	
	MARK ONE ONLY	21 🗖	Assistance with obtaining social services (for example, Medicaid, WIC, SSI, SSDI)	
	□ General hospital (including VA hospital)	22 🗆	Employment counseling or training for clients	
		23 🗆	Assistance in locating housing for clients	
	2 ☐ Psychiatric hospital	24 🗆	Domestic violence—family or partner violence	
	3 ☐ Other specialty hospital, for example,		services (physical, sexual, and emotional abuse)	
	alcoholism, maternity, etc.	25 🗆	Early intervention for HIV	
	(Specify:)	26 🗆	HIV or AIDS education, counseling, or support	
		27 🗆	Hepatitis education, counseling, or support	
*10.	What telephone number(s) should a potential	28 🗆	Health education other than HIV/AIDS or hepatitis	
	client call to schedule an <u>intake</u> appointment?	29 🗆	Substance abuse education	
		30 □ 31 □	Transportation assistance to treatment  Mental health services	
	1. () ext		Acupuncture	
	0 ( )	*33 🗆	Residential beds for clients' children	
	2. () ext	34 🗆	Self-help groups (for example, AA, NA, SMART Recovery)	
	Which of the following services are provided by this facility at this location, that is, the location	35 🗆	Smoking cessation counseling	
	listed on the front cover?	Pharmacotherapies		
		36 🗆	Antabuse®	
	MARK ALL THAT APPLY	37 🗆	Naltrexone (oral)	
	Assessment and Pre-Treatment Services	38 🗆	Vivitrol® (injectible Naltrexone)	
	□ Screening for substance abuse	39 🗆	Campral®	
	2 ☐ Screening for mental health disorders	40 □	Nicotine replacement	
	3 ☐ Comprehensive substance abuse assessment	41 🗆	Non-nicotine smoking/tobacco cessation	
	or diagnosis		medications (for example, Bupropion, Varenicline)	
	4 ☐ Comprehensive mental health assessment or diagnosis (for example, psychological or	42 🗆	Medications for psychiatric disorders	
	psychiatric evaluation and testing)	43 🗆	Methadone	
	5 ☐ Screening for tobacco use	44 🗆	Buprenorphine – Subutex® or generic	
	6 ☐ Outreach to persons in the community who may need treatment	45 🗆	Buprenorphine – Suboxone®	

*12.	Does this facility operate an Opioid Treatment Program (OTP) at this location?
	□ Opioid Treatment Programs are certified by SAMHSA's Center for Substance Abuse Treatment to use opioid drugs such as <b>methadone</b> in the treatment of opioid (narcotic) addiction.
	ı 1□ Yes
	□ No → SKIP TO Q.13 (BELOW)
*12a.	Are ALL of the substance abuse clients at this facility currently in the Opioid Treatment Program?
	1□ Yes
	o□ No
*12b.	Does the Opioid Treatment Program at this location provide <u>maintenance</u> services, <u>detoxification</u> services, or both?
	MARK ONE ONLY
	₁ ☐ Maintenance services
	2 □ Detoxification services
	₃ □ Both
13.	For each type of counseling listed below, please indicate approximately what percent of the substance abuse clients at this facility receive that type of counseling as part of their substance abuse treatment program.

	N	MARK ONE BOX FOR EACH TYPE OF COUNSELING				
Type of Counseling	NOT OFFERED	RECEIVED BY 25% OR LESS OF CLIENTS	RECEIVED BY 26% TO 50% OF CLIENTS	RECEIVED BY 51% TO 75% OF CLIENTS	RECEIVED BY MORE THAN 75% OF CLIENTS	
Individual counseling	о 🗆	1 🗆	2 □	3 🗆	4 □	
2. Group counseling	0 🗆	1 🗆	2 🗆	3 🗆	4 🗆	
3. Family counseling	0	1 🗆	2 🗆	3 🗆	4 🗆	
Marital/couples     counseling	o 🗆	1 🗆	2 🗆	з 🗆	4 🗆	

		MARK ONE FREQUENCY FOR EACH APPROACH						
CLINICAL/THERAPEUTIC APPROACHES		Never	Rarely	Sometimes	Always or Often	Not Familiar With This Approacl		
Substance abuse counseling		1 🗆	2 🗆	3 □	4 🗆	5 🗆		
2. 12-step facilitation		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
3. Brief intervention		1 🗆	2 🗆	3 🗆	4 🗆	5 🗆		
4. Cognitive-behavioral therapy		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
5. Contingency management/motivational incentives		1 🗆	2 🗆	3 🗆	4 🗆	5 🗆		
6. Motivational interviewing		1 🗆	2 🗆	3 🗆	4 🗆	5 🗆		
7. Trauma-related counseling		1 🗆	2 🗆	3 🗆	4 🗆	5 🗆		
8. Anger management		1 🗆	2 🗆	3 🗆	4 🗆	5 🗆		
9. Matrix Model		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
0. Community reinforcement plus vouchers		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
1. Rational emotive behavioral therapy (REBT)		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
2. Relapse prevention		1 🗆	2 🗆	з 🗆	4 🗆	5 🗆		
3. Other treatment approach (Specify:		1 🗆	2 🗆	3 🗆	4 🗆			
	)							
Are any of the following practices part of this facility's <u>standard operating</u> procedures?		*16. Does this facility, at this location, offer a <u>specially</u> designed program or group intended <u>exclusively</u> for DUI/DWI or other drunk driver offenders?						
MARK "YES" OR "NO" FOR EA	АСН	101 D	Oli Davi Oli C	diei dialik c	ilivei olleli	uers :		
YES  1. Required continuing education	<u>NO</u>	0 🗆		P TO Q.17 (B	BELOW)			
	o 🗆	*16a Doos	thic facility	y serve only		ionte?		
2. Periodic drug testing of clients ₁ □	o 🗆		•	y serve <u>omy</u>	DOI/DVVI CII	ents:		
		1 □ 0 □						
3. Regularly scheduled case review with a supervisor ₁ □	0 🗆	· —				use		
with a supervisor1 ☐  4. Case review by an appointed	о <b>П</b>	*17. Does		y provide su es in <u>sign la</u>				
with a supervisor	o 🗆	*17. Does treat locat <i>Am</i> e	ment service tion for the rican Sign I		inguage at t aired <i>(for</i> ex	this <i>cample,</i>		
with a supervisor	o 🗆	*17. Does treat locat Ame Cued	ment service ion for the rican Sign Id Speech)?  ark "yes" if e	es in <u>sign la</u> hearing imp	anguage at to aired (for exigned Englistance)  counselor or	this cample, sh, or		

For each type of clinical/therapeutic approach listed below, please mark the box that best describes how

	trea Eng	this facility provide su tment services in a lang lish at this location?  Yes  No -> SKIP TO Q.19 (Note that the services in a lang lish?  K ONE ONLY  Staff counselor who spe other than English -> Counselor who spe	NEXT COLUMN)  s substance abuse guage other than		Column A – Please indicaccepted into treatment and the substance abuse treatment exclusively for that type of CLIENT	cate the at this lower this lower this as a speciant program of client and the column of the column	Column ially des ram or g at this lo	n <b>A</b> : Ind signed group	mn B ERS IALLY GNED GRAM
	2 🗆	On-call interpreter (in pe brought in when needed			TPE OF GENERAL	YES	NO	YES	NO
	3 🗆	BOTH staff counselor ar	,	1.	Adolescents	1 🗆	0 🗆	1 🗆	0 🗆
*18b.	In w	interpreter → GO TO Contact of the languages do facility provide substar	Q.18b (BELOW)  staff counselors at	2.	Clients with co-occurring mental and substance abuse disorders	1 🗆	0 □	1 🗆	0 □
	MAR	K ALL THAT APPLY		3.	Criminal justice clients (other than DUI/DWI)	1 🗆	0 🗆	1 🗆	o 🗆
		<mark>erican Indian or Alaska</mark> I Hopi	<mark>Native:</mark> ₃□ Navajo	4.	Persons with HIV or AIDS	1 🗆	0 🗆	1 🗆	0 🗆
		Lakota Other American Indian of Alaska Native language	4□ Yupik or	5.	Lesbian, gay, bisexual, or transgender (LGBT) clients	1 🗆	0 🗆	1 🗆	0 🗆
		(Specify:	)	6.	Seniors or older adults	1 🗆	0 🗆	1 🗆	0 🗆
		er Languages: Arabic	13 ☐ Korean	7.	Adult women	1 🗆	0 🗆	1 🗆	0 🗆
	7 🗆	Any Chinese language Creole	14 ☐ Polish 15 ☐ Portuguese	8.	Pregnant or postpartum women	1 🗆	o 🗆	1 🗆	0 🗆
	9 🗆	French	16 ☐ Russian	9.	Adult men	1 🗆	0 🗆	1 🗆	0 🗆
		German	17 ☐ Spanish	10	. Specially designed			1	
		Hmong	18 ☐ Tagalog		programs or groups for any other types of clients			1 🗆	0 🗆
		Italian  Any other language (Spe	¹9 ☐ Vietnamese		(Specify below:				
	20 🗖	- Tany out of language (opt							
			)						)

*20. Does this facility offer HOSPITAL INPATIENT substance abuse services at this location, that is, the location listed on the front cover?	*22. Does this facility offer OUTPATIENT substance abuse services at this location, that is, the location listed on the front cover?
r 1□ Yes	r 1□ Yes
∘ □ No → SKIP TO Q.21 (BELOW)	₀□ No → SKIP TO Q.23 (BELOW)
	<ul> <li>↓</li> <li>*22a. Which of the following OUTPATIENT services are offered at this facility?</li> </ul>
MARK "YES" OR "NO" FOR EACH	MARK "YES" OR "NO" FOR EACH
<u>YES</u> <u>NO</u>	YES NO
<ol> <li>Hospital inpatient detoxification 1 □ 0 □</li> <li>(Similar to ASAM Levels IV-D and III.7-D, medically managed or monitored inpatient detoxification)</li> </ol>	Outpatient detoxification
2. Hospital inpatient treatment	2. Outpatient methadone maintenance □ 0 □
intensive inpatient treatment)  NOTE: ASAM is the American Society of Addiction Medicine.	3. Outpatient day treatment or partial hospitalization
*21. Does this facility offer RESIDENTIAL (non-hospital) substance abuse services at this location, that is, the location listed on the front cover?  ☐ Yes ☐ No → SKIP TO Q.22 (TOP OF NEXT COLUMN)	<ul> <li>4. Intensive outpatient treatment</li></ul>
*21a. Which of the following RESIDENTIAL services are offered at this facility?	*23. Does this facility use a sliding fee scale?
MARK "YES" OR "NO" FOR EACH	□ No → SKIP TO Q.24 (PAGE 7)
YES NO	
<ol> <li>Residential detoxification</li></ol>	23a. Do you want the availability of a sliding fee scale published in SAMHSA's Directory/Locator?  (For information on Directory/Locator eligibility, see the inside front cover.)
(Similar to ASAM Level III.5, clinically managed high-intensity residential treatment, typically 30 days or less)	☐ The Directory/Locator will explain that sliding fee scales are based on income and other factors.
3. Residential long-term treatment	1 □ Yes 0 □ No

*24.		es this facility offer treatment at no ents who cannot afford to pay?	cha	rge to			SECTION B:
	1 🗆	Yes				RE	PORTING CLIENT COUNTS
	0 🗆	No → SKIP TO Q.25 (BELOW)					
•	clie	you want the availability of free carents published in SAMHSA's Direct	ory/	Locator?	27.	cli thi	estions 28 through 33 ask about the number of ents in treatment. If possible, report clients for s facility only. However, we realize that is not ways possible. Please indicate whether the
	(	The Directory/Locator will explain that clients should call the facility for inforn eligibility.				cli	ents you report will be for
	1 🗆	Yes				1 🗆	
	o 🗆	No				' -	
						<b>–</b> 2 🗆	This facility plus others
25.	fro or	es this facility receive any funding on the Federal Government, or state local governments, to support its suse treatment programs?	e, co	unty		3 □	Another facility will report this facility's client counts → SKIP TO Q.34 (PAGE 11)
	I	Do <u>not</u> include Medicare, Medicaid, or military insurance. These forms of clie payments are included in Q.26 below.	ent	eral	√ 27a.	Но	w many facilities will be included in your client unts?
	1 🗆	Yes				CO	unts:
	o 🗆	No					THIS FACILITY 1
	d $\square$	Don't Know					THIS FACILITY
***							+ ADDITIONAL FACILITIES
*26.	or i	ich of the following types of client insurance are accepted by this facionstance abuse treatment?					TOTAL FACILITIES
		MARK "YES," "NO," OR "DON'T KNOW	<i>l</i> " FO	R EACH		_	
		<u>YES</u>	<u>NO</u>	DON'T KNOW			
	1.	No payment accepted (free treatment for ALL clients)1 □	0 🗆	d 🗆	27b.		avoid double-counting clients, we need to know sich facilities are included in your counts. How
		Cash or self-payment □	0 🗆	d $\square$			Il you report this information to us?
		Medicare1 □	0 🗆	d $\square$		MA	RK ONE ONLY
		Medicaid	0 🗆	d 🗆		1 [	By listing the names and location addresses
	5.	A state-financed health insurance plan other than Medicaid	0 🗆	d 🗆		1 L	of these additional facilities in the "Additional Facilities Included in Client Counts" section
	6.	Federal military insurance such as TRICARE or Champ VA₁ □	0 🗆	d 🗆			on page 12 of this questionnaire or attaching a sheet of paper to this questionnaire
	7.	Private health insurance1 □	0 🗆	d $\square$		2 <b></b>	Please call me for a list of the additional
	8.	Access To Recovery (ATR) vouchers1	0 🗆	d 🗆			facilities included in these counts
	9.	IHS/638 contract care funds₁□	0 🗆	d $\square$			
	10.	Other1 □	0 🗆	d $\square$			
		(Specify:		)			

	HOSPITAL INPATIENT CLIENT COUNTS	28c. How many of the patients from the HOSPITAL INPATIENT TOTAL BOX received:
		<ul> <li>Include patients who received these drugs for detoxification or maintenance purposes.</li> </ul>
28.	On March 31, 2011, did any patients receive HOSPITAL INPATIENT <u>substance abuse</u> services at this facility?	ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")  1. Methadone dispensed
_	-1□ Yes	at this facility  2. Buprenorphine dispensed or
	□ No -> SKIP TO Q.29 (NEXT COLUMN)	prescribed at this facility
		28d. On March 31, 2011, how many hospital inpatient beds at this facility were specifically designated for substance abuse treatment?
₩ 28a.	On March 31, 2011, how many patients received the following HOSPITAL INPATIENT substance abuse services at this facility?	ENTER A NUMBER (IF NONE, ENTER "0") Number of beds
	abuse services at this facility?	Number of beds
	□ <b>COUNT</b> a patient in <b>one service only</b> , even if the patient received both services.	RESIDENTIAL (NON-HOSPITAL) CLIENT COUNTS
	<ul> <li>DO NOT count family members, friends, or other non-treatment patients.</li> </ul>	29. On March 31, 2011, did any clients receive RESIDENTIAL (non-hospital) substance abuse
	ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")	services at this facility?  1 □ Yes
	1. Hospital inpatient detoxification (Similar to ASAM Levels IV-D and III.7-D, medically managed or monitored inpatient detoxification)	0 □ No → SKIP TO Q.30 (PAGE 9)  29a. On March 31, 2011, how many clients received the following RESIDENTIAL substance abuse services at this facility?
	2. Hospital inpatient treatment (Similar to ASAM Levels IV and III.7, medically managed or	☐ <b>COUNT</b> a client in <b>one service only</b> , even if the client received multiple services.
	monitored intensive inpatient treatment)	<ul> <li>DO NOT count family members, friends, or other non-treatment clients.</li> </ul>
	HOSPITAL INPATIENT TOTAL BOX	ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")
		1. Residential detoxification (Similar to ASAM Level III.2-D, clinically managed residential detoxification or social detoxification)
28b.	How many of the patients from the HOSPITAL INPATIENT TOTAL BOX were <u>under</u> the age of 18?	2. Residential short-term treatment (Similar to ASAM Level III.5,
	ENTER A NUMBER (IF NONE, ENTER "0")	clinically managed high-intensity residential treatment, typically 30 days or less)
	Number under age 18	3. Residential long-term treatment (Similar to ASAM Levels III.3 and III.1, clinically managed medium- or low- intensity residential treatment, typically more than 30 days)
		RESIDENTIAL TOTAL BOX

29b.	How many of the clients from the RESIDENTIAL TOTAL BOX were <u>under</u> the age of 18?	OUTPATIENT CLIENT COUNTS
	ENTER A NUMBER (IF NONE, ENTER "0")  Number under age 18	30. During the month of March 2011, did any clients receive OUTPATIENT substance abuse services at this facility?
		0 □ No → SKIP TO Q.31 (PAGE 10)
29c.	How many of the clients from the RESIDENTIAL TOTAL BOX received:	30a. How many clients received each of the following OUTPATIENT substance abuse services at this facility during March 2011?
	<ul> <li>Include clients who received these drugs for detoxification or maintenance purposes.</li> </ul>	ONLY INCLUDE clients who received treatment in March AND were still enrolled in treatment on
	ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")	<u>March 31, 2011</u> .
	Methadone dispensed at this facility	□ COUNT a client in one service only, even if the client received multiple services.
	Buprenorphine dispensed or prescribed at this facility	DO NOT count family members, friends, or other non-treatment clients.
		ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")
		1. Outpatient detoxification (Similar to ASAM Levels I-D and II-D, ambulatory detoxification)
29d.	On March 31, 2011, how many residential <u>beds</u> at this facility were <u>specifically designated</u> for substance abuse treatment?	2. Outpatient methadone maintenance (Count methadone clients on this line only)
	INTER A NUMBER (IF NONE, ENTER "0")  Number of beds	3. Outpatient day treatment or partial hospitalization (Similar to ASAM Level II.5,
		20 or more hours per week)  4. Intensive outpatient treatment (Similar to ASAM Level II.1, 9 or more hours per week)
		5. Regular outpatient treatment (Similar to ASAM Level I, outpatient treatment, non-intensive)
		OUTPATIENT TOTAL BOX

30b.	How many of the clients from the OUTPATIENT TOTAL BOX were <u>under</u> the age of 18?  ENTER A NUMBER (IF NONE, ENTER "0")		ALL SUBSTANCE TREATMENT SET Including Hospital In Residential (non-hospital) a	TINGS
	Number under age 18	31.	This question asks you to consubstance abuse treatment facility into three groups: cl (1) abuse of both alcohol an alcohol; (2) abuse only of al only of drugs other than alcohol the percent of clients who were in each of these the	clients at this ients in treatment for id drugs other than cohol; or (3) abuse ohol.  on March 31, 2011,
			Clients in treatment for abus	se of:
30c.	How many of the clients from the OUTPATIENT		BOTH alcohol <u>and</u> drugs other than alcohol	%
	TOTAL BOX received:		2. ONLY alcohol	%
	<ul> <li>Include clients who received these drugs for detoxification or maintenance purposes.</li> </ul>		3. ONLY drugs other than alco	ohol%
	ENTER A NUMBER FOR EACH (IF NONE, ENTER "0")		тотл	AL 100 %
	Methadone dispensed at this facility	32.	Approximately what percent abuse treatment clients enro on March 31, 2011, had a dia mental and substance abuse	olled at this facility agnosed co-occurring
	Buprenorphine dispensed or prescribed at this facility		PERCENT OF CLIENTS (IF NONE, ENTER "0")	%
		33.	Using the most recent 12-mo which you have data, approx substance abuse treatment this facility have?	cimately how many
			OUTPATIENT CLIENTS: Of treatment, <u>not</u> individual treatment an admission to be the inition program or course of treatmere-admission as an admission as an admission.	eatment visits. Conside lation of a treatment ment. Count any
			☐ IF THIS IS A MENTAL HEA all admissions in which clie abuse treatment, even if su their secondary diagnosis.	nts received substance
			NUMBER OF SUBSTANCE ABUSE ADMISSIONS IN A 12-MONTH PERIOD	

## **SECTION C: GENERAL INFORMATION**

	Se	ection C should be completed for this facility only.	╹║┌	–₁□ Yes
*34.	tran at th	s this facility operate a halfway house or othe sitional housing for substance abuse clients his location, that is, the location listed on the	V	<ul><li>□ No → SKIP TO Q.38 (BELOW)</li><li>What is the NPI number for this facility?</li></ul>
	fron	t cover?		NPI
	1 🗆	Yes		
	0 🗆	No		
35.		ch statement below BEST describes this lity's smoking policy?	*38.	information about the facility's substance abuse treatment programs?
	MAR	K ONE ONLY		☐ Yes → Please check the front cover of this questionnaire to confirm that the website
	1 🗆	Smoking is <u>not permitted</u> on the property or within any building		address for this facility is correct  EXACTLY as listed. If incorrect or missing, enter the correct address.
	2 🗆	Smoking is permitted only outdoors		missing, enter the correct address.
	з 🗆	Smoking is permitted outdoors and in designated indoor area(s)	39.	If eligible, does this facility want to be listed in the National Directory and online Treatment Facility Locator? (See inside front cover for eligibility
	4 🗆	Smoking is <u>permitted anywhere without</u> <u>restriction</u>		information.)
	5 🔲	Other (Specify:)		₁□ Yes ₀□ No
	by a	redited to provide substance abuse services iny of the following organizations?  To not consider personal-level credentials or genusiness licenses such as a food service license.	eral	National Directory of Drug and Alcohol Abuse Treatment Programs when it is published?  - □ Yes
			↓	$_{0}\square$ No $\longrightarrow$ SKIP TO Q.41 (BELOW)
		MARK "YES," "NO," OR "DON'T KNOW" FOR EAC DON	<del>+</del> 0a.	Would you prefer to receive a CD or paper copy of the <i>Directory</i> ?
		YES NO KNO	<u>N</u>	1 □ CD
	1. 8	State substance abuse agency1		2 ☐ Paper
	2. 8	State mental health department1 □ 0 □ d □	41.	Who was primarily responsible for completing this
	3. 8	State department of health1 0 0 d		form? This information will only be used if we need
	4. H	Hospital licensing authority1 □ 0 □ d □		to contact you about your responses. It will not be published.
	5. T	The Joint Commission1 0 0 d 0		Namo
		Commission on Accreditation of Rehabilitation Facilities (CARF)1 □ 0 □ d □		Name:
		National Committee for Quality Assurance (NCQA)1☐ 0☐ d☐		Phone Number: ()
	8. (	Council on Accreditation (COA)1 □ 0 □ d □		Fax Number: ()
		Another state or local agency or other organization1 □ 0 □ d □		Email Address:
	(	Specify:)		Facility Email Address:

37.

Does this facility have a National Provider Identifier (NPI) number?

## **ADDITIONAL FACILITIES INCLUDED IN CLIENT COUNTS**

Complete this section if you reported clients for this facility plus other facilities, as indicated in Question 27.

FACILITY NAME:	FACILITY NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
STATE:ZIP:	STATE: ZIP:
PHONE:	PHONE:
FACILITY EMAIL ADDRESS:	FACILITY EMAIL ADDRESS:
FACILITY NAME:	FACILITY NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
STATE:ZIP:	STATE: ZIP:
PHONE:	PHONE:
FACILITY EMAIL ADDRESS:	FACILITY EMAIL ADDRESS:
FACILITY NAME:	FACILITY NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
STATE:ZIP:	STATE: ZIP:
PHONE:	PHONE:
FACILITY EMAIL ADDRESS:	FACILITY EMAIL ADDRESS:
FACILITY NAME:	FACILITY NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
STATE:ZIP:	STATE: ZIP:
PHONE:	PHONE:
FACILITY EMAIL ADDRESS:	FACILITY EMAIL ADDRESS:

If you require additional space, please continue on the next page.

ANY ADDITIONAL COMMENTS
Pledge to respondents
The information you provide will be protected to the fullest extent allowable under the Public Health Service Act, 42 USC Sec 501(n). This law permits the public release of identifiable information about an establishment only with the consent of that establishment and limits the use of the information to the purposes for which it was supplied. With the explicit consent of eligible treatment facilities, information provided in response to survey questions marked with an asterisk will be published in SAMHSA's <i>National Directory of Drug and Algority Locator</i> . Personness to non asterisked questions

and Alcohol Abuse Treatment Programs and the Substance Abuse Treatment Facility Locator. Responses to non-asterisked questions will be published only in statistical summaries so that individual treatment facilities cannot be identified.

Thank you for your participation. Please return this questionnaire in the envelope provided. If you no longer have the envelope, please mail this questionnaire to:

#### **MATHEMATICA POLICY RESEARCH**

ATTN: RECEIPT CONTROL - Project 06667 P.O. Box 2393 Princeton, NJ 08543-2393

Public burden for this collection of information is estimated to average 40 minutes per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to SAMHSA Reports Clearance Officer, Room 7-1044, 1 Choke Cherry Road, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this project is 0930-0106.

## APPENDIX B OTP Survey Methodology

This Appendix contains basic data collection and quality assurance procedures for the 2011 OTP Survey.

#### Field Period and Reference Date

The survey reference date for the 2011 OTP Survey was March 31, 2011. The field period was March 31 through October 24, 2011.

## **Survey Universe**

The OTP Survey universe consisted of the 1,371 facilities (Table 1.1) in the Substance Abuse and Mental Health Services Administration (SAMHSA) Inventory of Substance Abuse Treatment Services (I-SATS) that were identified as OTPs.

#### **Data Collection**

Approximately six weeks before the survey reference date (March 31, 2011), an advance letter from SAMHSA was mailed to the attention of the facility directors to alert them to the upcoming survey. The letter also updated records with new address information received from the U.S. Postal Service. During the last week of March 2011, a data collection packet (including a cover letter; letters of endorsement from the State Opioid Treatment Authority [SOTA], American Association for Treatment of Opioid Dependence [AATOD], and CSAT; information on completing the survey on the web; and a fact sheet of frequently asked questions) was mailed to each facility. The web survey also became available on March 31, 2011. If a facility wanted to complete the questionnaire by mail, it could call the toll-free helpline and request that a hard copy questionnaire be mailed to the facility.

Four weeks after the mailing of the first data collection packet, thank you/reminder letters were sent to all facilities. Four weeks after the mailing of the reminder letter, nonresponding facilities were mailed a second data collection packet that included a hard copy questionnaire. About three to four weeks after the second survey data collection packet mailing, nonrespondents received a reminder telephone call. Those facilities that had not responded within three to four weeks of the reminder call were telephoned and asked to complete the survey over the telephone. During the data collection phase, contract personnel were available by telephone to answer facilities' questions concerning the survey. Web-based support for facilities completing the questionnaire on the web was also available. Several reminder letters were sent to nonrespondents over the course of the data collection period via fax, mail, and email. To increase the survey response rate, SOTA representatives were contacted during the data collection period to inform them of their state's progress and to request additional help in encouraging responses.

### **Quality Assurance**

The web questionnaire was a self-editing instrument; that is, respondents were prompted to complete missing responses and to confirm or correct inconsistent responses, with verifications built in to check automatically for inconsistent or incomplete answers.

All mail questionnaires underwent manual review for consistency and missing data. Calls were made to facilities to resolve unclear responses and obtain missing data. After data entry, automated quality assurance reviews were conducted. The reviews incorporated the rules used in manual editing plus consistency checks and checks for data outliers not readily identified by manual review.

## **Item Nonresponse**

Item nonresponse was minimized through careful editing and extensive follow-up. Item response rates for the 2011 OTP survey averaged approximately 95 percent across all 170 items. Facility characteristics had an average item response rate of 99 percent. The average item response rate for patient demographic items and methadone and buprenorphine dosage items was lower, approximately 89 percent.

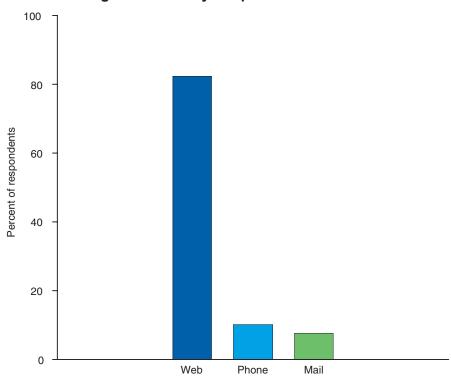


Figure 10. Survey Response Mode: 2011

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) Survey and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

## APPENDIX C

## MEDICATION-ASSISTED OPIOID THERAPY: A TIMELINE

- 1914 (Dec. 17) The Harrison Narcotics Act (Public Law No. 223, 63rd Congress) was approved. All who dispensed narcotics were required to register with the Bureau of Internal Revenue, pay a special tax (\$1 per year), and keep records. Physicians could prescribe narcotics to patients, but this was interpreted by the courts to mean that physicians could prescribe narcotics (opium or coca leaves, their salts, derivatives, or preparations) in the course of normal treatment, not for the treatment of addiction. Therefore, this act prohibited physicians from prescribing opiates to treat or maintain persons addicted to opiates.<sup>1,2</sup>
- 1939 Methadone was synthesized at I.G. Farbenkonzern, a subsidiary of Farbwerke Hoechst, Frankfurt am Main, Germany.<sup>3</sup>
- 1942 Pharmacological tests began on Va 10820, which became known as methadone in 1947.<sup>3</sup>
- 1947 The commercial production of methadone was first introduced by Eli-Lilly; it was given the trade name Dolophine (derived from the Latin dolor [pain] and finis [end]).<sup>3</sup>
- 1950s Methadone was first used as a treatment for opioid abstinence syndrome (withdrawal) by the U.S. Public Health Service Hospital/Prison in Lexington Kentucky.<sup>3, 4</sup>
- New York City Health Research Council awarded a grant for methadone research to Vincent Dole at Rockefeller University. Marie Nyswander and Mary Jeanne Kreek joined the research team. Research began with two patients; the research was later expanded to include 22 patients. Results of this research included the determination that only one daily dose of methadone was required for maintenance to prevent opioid craving and symptoms of withdrawal.<sup>5,6</sup>
- 1964 Methadone maintenance program was first implemented.<sup>7</sup>

<sup>&</sup>lt;sup>1</sup> Kauffman, J. F. (2003). Methadone treatment and recovery for opioid dependence. Primary Psychiatry, 10(9), 61-64.

<sup>&</sup>lt;sup>2</sup> The Harrison Narcotics Act (1914), http://www.naabt.org/documents/Harrison Narcotics Tax Act 1914.pdf

<sup>&</sup>lt;sup>3</sup> Gerlach, R. (2004). A brief overview on the discovery of methadone. Retrieved from www.indro-online.de/ discovery.pdf

<sup>&</sup>lt;sup>4</sup> Fishman, S. M., Wilsey, B., Mahajan, G., & Molina, P. (2002). Methadone reincarnated: Novel clinical applications with related concerns. Pain Medicine, 3(4), 339–348. doi: 10.1046/j.1526-4637.2002.02047.x

National Alliance of Methadone Advocates. (2003, November 13). Methadone 101. National Alliance for Medication Assisted Recovery Website. Retrieved from http://www.methadone.org/library/m101.html

<sup>&</sup>lt;sup>6</sup> Gouldin, W. M., Kennedy, D. T., & Small, R. E. (2000). Methadone: History and recommendations for use in analgesia. APS Bulletin, 10(5), 1-9.

Joseph, H. (2003). Methadone maintenance treatment and clinical issues: The history of methadone maintenance. National Alliance for Medication Assisted Recovery Website. Retrieved from http://www.methadone.org/library/joseph\_1994\_methadone\_clinical.html

- The initial research project of methadone use for treatment of opioid addiction was expanded and transferred to the Manhattan General Hospital in New York City (under the guidance of Ray Trussell, the New York City Commissioner of Hospitals). Additionally, under the direction of Frances Rowe Gearing (chief of evaluation), a unit to evaluate the expansion and progress of methadone treatment was created at Columbia University School of Public Health and Administrative Medicine. This unit's work was reviewed by an independent committee of physicians and scientists under the chairmanship of Henry Brill.<sup>7</sup>
- 1969 Burprenorphine was first synthesized as an analgesic in England.<sup>8</sup>
- 1970 The Comprehensive Drug Abuse Prevention and Control Act of 1970 (Public Law 91-513) was passed. This legislation also consolidated federal drug control statutes into the Controlled Substances Act and the Controlled Substances Import and Export Act. The result of this legislation was a consolidation of numerous laws regulating the manufacture and distribution of narcotics, stimulants, depressants, hallucinogens, anabolic steroids, and chemicals used in the illicit production of controlled substances. As a result, all substances (drugs) that were regulated under existing federal law were placed into one of five schedules. (Schedule I refers to the most dangerous drugs with no recognized medical use; Schedule V is for the least dangerous drugs.) This act provided a mechanism for substances to be controlled, added to a schedule, decontrolled, removed from control, rescheduled, or transferred from one schedule to another.<sup>9</sup>
- 1971 President Richard Nixon ordered the creation of the first federal program for methadone treatment of opiate addiction.<sup>10</sup>
  - An estimated 25,000 patients were enrolled in methadone maintenance treatment programs.6
- 1972 The Food and Drug Administration (FDA) approved methadone for use in treating opioid addiction.<sup>11</sup>
- 1973 Regulations for control of methadone were enacted: a closed system was established that required separate registrations for each doctor or pharmacy to prescribe or dispense methadone, regardless of reason for usage.<sup>6</sup>
- 1974 The Narcotic Addict Treatment Act of 1974 (Public Law 93-281) was enacted. This act amended the Controlled Substance Act of 1970 to provide for the registration of practitioners conducting narcotic treatment programs (methadone clinics). It provided legal definitions for the phrases "maintenance treatment" and "detoxification treatment." <sup>11</sup>

<sup>&</sup>lt;sup>8</sup> U.S. National Institutes of Health, National Institute on Drug Abuse. (2005). Heroin: Abuse and addiction (NIH Publication Number 05-4165). Retrieved from http://www.drugabuse.gov/publications/research-reports/heroin-abuse-addiction

The Catholic University of America, Office of General Counsel. (2010). Summary of federal laws: The controlled substances act of 1970. The Catholic University of America Website. Retrieved from http://counsel.cua.edu/fedlaw/csa1970.cfm

<sup>&</sup>lt;sup>10</sup> Kreek, M. J., & Vocci, F. J. (2002). History and current status of opioid maintenance treatments: blending conference session. Journal of Substance Abuse Treatment, 23(2), 93-105.

<sup>&</sup>lt;sup>11</sup> The National Alliance of Advocates for Buprenorphine Treatment. (2012). A history of opiate laws in the United States. Retrieved from http://www.naabt.org/laws.cfm

- 1976 Pharmacies were permitted to dispense methadone as an analgesic (closed-system regulatory restrictions remained in effect for methadone dispensed for narcotic withdrawal).<sup>6</sup>
- 1977 Per the 1978 National Drug and Alcoholism Treatment Unit Survey (NDATUS), a total of 81,479 clients were in methadone treatment on May 1, 1977. 12
- 1978 A total of 656 FDA approved methadone treatment units responded to the 1978 NDATUS; this represented 98 percent of all FDA approved facilities. Per 1978 NDATUS, there were 78,119 clients in methadone treatment on April 30, 1978.<sup>13</sup>
- A total of 606 of 651 (93.1 percent response rate) FDA-approved methadone and levoalpha-acetyl-methadol (LAAM) treatment units responded to the 1979 NDATUS. Based on the respondents to the survey, there were 74,318 methadone clients and 632 LAAM clients in treatment on April 30, 1979.<sup>14</sup>
- 1981 Buprenorphine was first approved for marketing in the United States as a pain reliever.<sup>15</sup>
- 1990 Per the 1990 NDATUS, there were 599 facilities that provided opioid replacement therapy. In these facilities, 66,510 clients received opioid (methadone) replacement therapy of the survey reference data of Sept. 28, 1990.<sup>16</sup>
- 1991 Per the 1991 NDATUS, there were 584 facilities that provided opioid replacement therapy). In these responding facilities, 99,111 clients received opioid (methadone) replacement therapy on the survey reference date of Sept. 30, 1991. 16
- 1992 Per the 1992 NDATUS, there were 627 facilities that provided opioid replacement therapy. In these facilities, 117,508 clients received opioid (methadone) replacement therapy on the survey reference data of Sept. 30, 1992.<sup>16</sup>
- 1993 Per the 1993 NDATUS, there were 690 facilities that provided opioid replacement therapy. In these facilities, 112,715 clients received opioid (methadone) replacement therapy on the survey reference date of Oct. 1, 1993.<sup>16</sup>
  - LAAM was approved by the FDA for use in the treatment of opiate/opioid addiction. LAAM has a longer duration of action then methadone and requires dosing every 2 to 3 days for maintenance. LAAM binds to mu opioid receptors in the membranes of nerve cells in the brain resulting in a blocking of euphoric effects, controlling drug cravings, and

U.S. Department of Health and Human Services, National Institute on Drug Abuse, Division of Scientific and Program Information. (1977). Data from the National Drug and Alcoholism Treatment Utilization Survey (NDATUS).

U.S. Department of Health and Human Services, National Institute on Drug Abuse, Division of Scientific and Program Information. (1978). Data from the National Drug and Alcoholism Treatment Utilization Survey (NDATUS).

U.S. Department of Health and Human Services, National Institute on Drug Abuse, Division of Scientific and Program Information. (1979). Data from the National Drug and Alcoholism Treatment Utilization Survey (NDATUS).

<sup>&</sup>lt;sup>15</sup> Johnson, R. E., Fudala, P. J., & Payne, R. (2005) Buprenorphine: Considerations for pain management. Journal of Pain and Symptom Management, 29(3), 297-326.

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (1999). Uniform Facility Data Set (UFDS): 1997 (DASIS SeriesS-6, DHHS Publication No. (SMA) 99-3314). Rockville, MD: Author.

- reduction of withdrawal symptoms. It was marketed under the brand name ORLAAM®.17, 18, 19, 20
- 1994 Approximately 850 methadone maintenance treatment programs in 40 states were serving about 115,000 persons.
- 1995 Per 1995 Uniform Facility Data Set (UFDS), there were 616 facilities that provided opioid replacement therapy; a total of 117,895 clients received opioid replacement therapy on the survey reference date of Oct. 2, 1995.<sup>21</sup>
- 1996 Per the 1996 UFDS, there were 902 facilities that provided opioid replacement therapy; a total of 123,906 clients received opioid replacement therapy on the survey reference date of Oct. 1, 1996.17, <sup>22</sup>
- 1997 FDA had approved 869 outpatient methadone treatment programs as of early 1997; of these, 209 outpatient programs had also been approved for LAAM treatment. There were almost 300 additional inpatient hospital detoxification units. Because the FDA considered individual dispensing sites or locations as separate treatment programs for inspectional purposes, some sites might have been affiliated with each other for licensing purposes.<sup>23</sup>

  Per the 1997 UFDS, there were 768 facilities that provided opioid replacement therapy; a total of 135,696 clients received methadone and 2,313 clients received LAAM on the survey reference date of Oct. 1, 1997.<sup>17</sup>
- 1998 Per the 1998 UFDS, there were 811 facilities that provided opioid replacement therapy; a total of 145,610 clients received methadone and 3,420 clients received LAAM on the survey reference date of Oct. 1, 1998.<sup>24</sup>
- 1999 New regulations were proposed in the Federal Register, July 22, 1999 (Volume 64, Number 140, Pages 39809 39857) that would revise the conditions for the use of narcotic drugs

- Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (1998). Uniform Facility Data Set (UFDS): Data for 1996 and 1980-1996 (DASIS SeriesS-3, DHHS Publication No. (SMA) 98-3176). Rockville, MD: Author.
- Narcotic drugs in maintenance and detoxification treatment of narcotic dependence; Repeal of current Regulations and proposal to adopt new regulations; Proposed rule. (1999, July 22). Federal Registrar 64(40), 39809-39857. Retrieved from http://www.fda.gov/ohrms/dockets/98fr/072299b.txt
- Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2000). Uniform Facility Data Set (UFDS): 1998 (DASIS SeriesS-10, DHHS Publication No. (SMA) 00-3463). Rockville, MD: Author.

Drug Information Online. (2010). Levomethadyl (Oral route). Retrieved from http://www.drugs.com/cons/levomethadyl.html

<sup>&</sup>lt;sup>18</sup> RxList Inc., The Internet Drug Index. (2004). ORLAAM (levomethadyl acetate hydrochloride). Retrieved from http://www.rxlist.com/orlaam-drug.htm#wcp

<sup>&</sup>lt;sup>19</sup> Clark, N. C., Lintzeris, N., Gijsbers, A., Whelan, G., Dunlop, A., Ritter, A., & Ling, W. W. (2002). LAAM maintenance vs methadone maintenance for heroin dependence. Cochrane Database of Systematic Reviews. doi: 10.1002/14651858.CD002210.

<sup>&</sup>lt;sup>20</sup> Johns Hopkins Medical Institutions. (1998). Hopkins study shows languishing addictions drug really works. Retrieved from ScienceDaily website: http://www.sciencedaily.com/releases/1998/08/980817081828.htm

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (1997). Uniform Facility Data Set (UFDS): Data for 1995 and 1980-1995 (DASIS SeriesS-2, DHHS Publication No. (SMA) 97-3161). Rockville, MD: Author.

in maintenance and detoxification treatment of opioid addiction. If approved, it would also result in the repealing of the existing narcotic treatment regulations enforced by the FDA and create a new regulatory system based on an accreditation model under 42 CFR part 8 and shift administrative responsibility of oversight of methadone treatment programs from the FDA to the Substance Abuse and Mental Health Services Administration (SAMHSA).<sup>23</sup>

Per the 1999 UFDS, there were 1,206 facilities that provided opioid replacement therapy.<sup>25</sup> An estimated 3,500 clients in the United States were being treated with LAAM.<sup>26</sup>

- 2000 The Drug Addiction Treatment Act of 2000 passed (Public Law 106-310, 106th Congress). This act provides for waiver authority for physicians who dispense or prescribe certain narcotic drugs for maintenance treatment or detoxification treatment. It permits qualified physicians to obtain a waiver from the separate registration requirements of the Narcotic Addict Treatment Act to treat opioid addiction with Schedule III, IV, and V opioid medications or combinations of such medications that have been specifically approved by the FDA for that indication.<sup>27</sup>
- Per the 2000 UFDS, there were 1,215 facilities that provided opioid replacement therapy; a total of 172,497 clients received methadone and 5,715 clients received LAAM on the survey reference date of Oct. 1, 2000.<sup>28</sup>
- 2001 LAAM was removed from the European market due to reports of life threatening ventricular rhythm disorders.<sup>29</sup>
- (May 18) Certification of programs using opioid drugs in the treatment of opioid dependence and addiction was transferred to SAMHSA from FDA. These programs became known as Opioid Treatment Programs.<sup>30</sup>
- 2002 Per the 2002 National Survey of Substance Abuse Treatment Services (N-SSATS), there were 1,080 Opioid Treatment Programs; a total of 225,012 clients received methadone and 3,128 clients received LAAM on the survey reference date of March 29, 2002.<sup>31</sup>
  - (Oct 7) DEA rescheduled buprenorphine from a schedule V drug to a schedule III drug.

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2001). Uniform Facility Data Set (UFDS): 1999 (DASIS SeriesS-13, DHHS Publication No. (SMA) 01-3516). Rockville, MD: Author.

<sup>&</sup>lt;sup>26</sup> The European Agency for the Evaluation of Medicinal Products, Human Medicines Evaluation Unit. (1999). EMEA public statement on levacetylmethadol (ORLAAM) – Life threatening cardiac rhythm disorders. Retrieved from http://www.ema.europa.eu/docs/en GB/document library/Public statement/2010/08/WC500095444.pdf

<sup>&</sup>lt;sup>27</sup> Drug Addiction Treatment Act of 2000, 21 U.S.C. § 801. (2000).

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2002). National Survey of Substance Abuse Treatment Services (N-SSATS):2000. Data on substance abuse treatment facilities (DASIS Series: S-16, DHHS Publication No. (SMA) 02-3668). Rockville, MD: Author.

The European Agency for the Evaluation of Medicinal Products, Evaluation of Medicines for Human Use. (2001) EMEA public statement on the recommendation to suspend the marketing authorization for ORLAAM (levacetylmethadol) in the European Union. Retrieved from http://www.ema.europa.eu/docs/en\_GB/document\_library/Public statement/2009/12/WC500018335.pdf

<sup>&</sup>lt;sup>30</sup> Certification of Opiod Treatment Programs, 42 C.F.R. § 8 (2001).

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2003). National Survey of Substance Abuse Treatment Services (N-SSATS):2002. Data on substance abuse treatment facilities (DASIS Series: S-19, DHHS Publication No. (SMA) 03-3777). Rockville, MD: Author.

- (Oct 8) FDA approved Subutex® and Suboxon® for treatment of opiate dependence.32
- 2003 LAAM production in the United States was discontinued by Roxane Laboratories, Inc., in September 2003. 18, 33
  - Per the 2003 N-SSATS, there were 1,067 Opioid Treatment Programs; a total of 227,003 clients received methadone and 2,564 clients received LAAM on the survey reference date of March 31, 2003.<sup>34</sup>
- 2004 Per the 2004 N-SSATS, there were 1,070 Opioid Treatment Programs; a total of 240,961 clients received methadone and 727 clients received buprenorphine on the survey reference date of March 31, 2004, in these OTPs. An additional 2,397 clients received buprenorphine in facilities that were not OTPs.<sup>35</sup>
- 2005 Per the 2005 N-SSATS, there were 1,069 Opioid Treatment Programs; a total of 235,836 clients received methadone and 1,165 clients received buprenorphine on the survey reference date of March 31, 2005, in these OTPs. An additional 5,099 clients received buprenorphine in facilities that were not OTPs.<sup>36</sup>
  - Every qualified doctor within a group medical practice could now prescribe Suboxone® up to his or her individual physician limit of 30 patients instead of the entire practice being restricted to 30 patients. (Aug 2, 2005; Public Law 109-56; Bill S.45 signed by President Bush)
- 2006 Per the 2006 N-SSATS, there were 1,203 Opioid Treatment Programs; a total of 257,919 clients received methadone and 2,042 clients received buprenorphine on the survey reference date of March 31. 2006, in these OTPs. An additional 7,034 clients received buprenorphine in facilities that did not have OTPs.<sup>37</sup>

<sup>&</sup>lt;sup>32</sup> U.S. Department of Health and Human Services, Food and Drug Administration. (2002). Subutex<sup>®</sup> and Suboxone<sup>®</sup> approved to treat opiate dependence, T02-38. Retrieved from http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatientsandProviders/ucm191521.htm

<sup>&</sup>lt;sup>33</sup> U.S. Department of Health and Human Services, Food and Drug Administration. (2013). Drugs to be discontinued. Retrieved from: http://www.fda.gov/DrugS/DrugSafety/DrugShortages/ucm050794.htm

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2004). National Survey of Substance Abuse Treatment Services (N-SSATS):2003. Data on substance abuse treatment facilities (DASIS Series: S-24, DHHS Publication No. (SMA) 04-3966). Rockville, MD: Author.

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2005). National Survey of Substance Abuse Treatment Services (N-SSATS):2004. Data on substance abuse treatment facilities (DASIS Series: S-28, DHHS Publication No. (SMA) 05-4112). Rockville, MD: Author.

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2006). National Survey of Substance Abuse Treatment Services (N-SSATS):2005. Data on substance abuse treatment facilities (DASIS Series: S-34, DHHS Publication No. (SMA) 06-4206). Rockville, MD: Author.

<sup>&</sup>lt;sup>37</sup> Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2007). National Survey of Substance Abuse Treatment Services (N-SSATS):2006. Data on substance abuse treatment facilities (DASIS Series: S-39, DHHS Publication No. (SMA) 07-4296). Rockville, MD: Author.

- Public Law 109-469, Section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g) (2) was amended. The 30-patient limit for treatment with buprenorphine was raised to 100 patients (Dec 29, 2006; Bill H.R. 6344 signed by President Bush into law).<sup>38</sup>
- 2007 Per the 2007 N-SSATS, there were 1,108 Opioid Treatment Programs; a total of 262,684 clients received methadone and 3,032 clients received buprenorphine on the survey reference date of March 30, 2007, in these OTPs.<sup>39</sup>
- 2008 Per the 2008 N-SSATS, there were 1,132 Opioid Treatment Programs; a total of 268,071 clients received methadone and 4,280 clients received buprenorphine on the survey reference date of March 31, 2008, in these OTPs. An additional 11,452 clients received buprenorphine in facilities that did not have OTPs.<sup>40</sup>
- 2009 Per the 2009 N-SSATS, there were 1,239 Opioid Treatment Programs; a total of 284,608 clients received methadone and 5,708 clients received buprenorphine on the survey reference date of March 31, 2009, in these OTPs. An additional 18,465 clients received buprenorphine in facilities that did not have OTPs.<sup>41</sup>
- 2010 (May 7) FDA granted final approval to Teva Pharmaceuticals USA for Buprenorphine HCL Sublingual Tablets in 2 & 8 mg formulations. These tablets are the AB-rated generic equivalent of Rickett Benckiser's Subutex® and are indicated for the treatment of narcotic addiction.<sup>42</sup>

Per the 2010 N-SSATS, there were 1,166 Opioid Treatment Programs; a total of 298,170 clients received methadone and 6,486 clients received buprenorphine on the survey reference date of March 31, 2010, in these OTPs. An additional 20,970 clients received buprenorphine in facilities that did not have OTPs.<sup>43</sup>

The National Alliance of Advocates for Buprenorphine. (2011). 30-100 patient limit. Retrieved from http://www.naabt.org/30\_patient\_limit.cfm

<sup>&</sup>lt;sup>39</sup> Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2008). National Survey of Substance Abuse Treatment Services (N-SSATS):2007. Data on substance abuse treatment facilities (DASIS Series: S-44, DHHS Publication No. (SMA) 08-4348). Rockville, MD: Author.

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<sup>&</sup>lt;sup>42</sup> U.S. Department of Health and Human Services, Food and Drug Administration. (2010, May 7). [Letter to Barr Laboratories, Inc., FDA Approval Letter ANDA 090360]. Retrieved from http://www.tevagenerics.com/assets/base/products/fda/Bupr 90-360.pdf

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- (Aug 30) FDA approved a Suboxone® sublingual film product for use in the maintenance treatment of opioid dependence when used as part of a complete treatment plan that included counseling and psychosocial support.<sup>44</sup>
- (Oct 12) FDA approved Vivitrol® to treat and prevent relapse after patients with opioid dependence have undergone detoxification treatment. Vivitrol® is an extended-release formulation of naltrexone administered by intramuscular injection once a month and works to block opioid receptors in the brain. (It was approved to treat alcohol dependence in 2006.) 45
- 2011 Per the 2010 N-SSATS, there were 1,189 Opioid Treatment Programs; a total of 306,440 clients received methadone and 7,020 clients received buprenorphine on the survey reference date of March 31, 2011, in these OTPs. An additional 25,656 clients received buprenorphine in facilities that did not have OTPs.<sup>46</sup>
- 2012 (Sept. 18) Reckitt Benckiser Pharmaceuticals, Inc. advised the FDA that it was voluntarily discontinuing Suboxone® tablets (buprenorphine and naloxone sublingual tablets) in the United States due to increasing concerns with pediatric exposure. An analysis based on data from the U.S. Poison Control Centers had consistently found higher rates of accidental pediatric exposure with Suboxone® Tablets than seen with the Suboxone® Film. Suboxone® tablets would be off market by March 2013.<sup>47</sup>
- 2013 (Jan. 7) The final rule affecting the operation of SAMHSA-certified Opioid Treatment Programs (OTPs) modifying 42 CFR Part 8, went into effect, reflecting changes in the way buprenorphine products could be dispensed by OTPs. The time in treatment requirements for patients receiving buprenorphine in OTPs for take home doses was eliminated. Time in treatment requirements still applied to OTPs when dispensing methadone products to patients.<sup>48</sup>

<sup>&</sup>lt;sup>44</sup> U.S. Department of Health and Human Services, Food and Drug Administration. (2010 October 30). [Letter to Renckitt Benckiser Pharmaceuticals, Inc., FDA Approval Letter NDA 022410]. Retrieved from http://buprenorphine.samhsa.gov/ApprovalLetterSuboxoneFilm.pdf

<sup>&</sup>lt;sup>45</sup> U.S. Department of Health and Human Services. Food and Drug Administration. (2010). FDA approves injectable drug to treat opioid-dependent patients [Press Release]. Retrieved from http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/2010/ucm229109.htm

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<sup>&</sup>lt;sup>48</sup> U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. [ca. 2012]. [Letter to Colleague]. Retrieved from http://buprenorphine.samhsa.gov/DearColleague\_ FinalRule\_120312.pdf

(Feb. 22) Generic buprenorphine hydrochloride and Naloxone hydrochloride dehydrate in sublingual tables form was approved by the FDA.<sup>49</sup>

(Mar. 21) The FDA Psychopharmacologic Drugs Advisory Committee voted in favor of approval of Probuphine® for the treatment of adult patients with opioid dependence. Probuphine® is a slow-release, subdermal implant formulation of buprenorphine and is designed to deliver up to six months of buprenorphine following a single treatment. The New Drug Application had been submitted to the FDA in October 2012 seeking approval for treatment of opioid dependence. A license agreement between Titan Pharmaceuticals and Braeburn Pharmaceuticals granted Braeburn exclusive commercialization rights to Probuphine® in the United States and Canada. 50, 51

<sup>&</sup>lt;sup>49</sup> U.S. Department of Health and Human Services, Food and Drug Administration. (2013). First-time generic drug approvals – February 2013. Retrieved from http://www.fda.gov/Drugs/DevelopmentApprovalProcess/ HowDrugsareDevelopedandApproved/DrugandBiologicApprovalReports/ANDAGenericDrugApprovals/ ucm349491.htm

<sup>&</sup>lt;sup>50</sup> Titan Pharmaceuticals, Inc. (2013). Titan Pharmaceuticals announces FDA Advisory Committee recommends approval of Probuphine<sup>®</sup> for the treatment of adult patients with opioid dependence [Press release]. Retrieved from http://www.titanpharm.com/press/2013/13-21-2013-Titan-PDAC-Positive-Vote-PR-FINAL.htm

U.S. Food and Drug Administration, Psychopharmacologic Drugs Advisory Committee. (2013). Probuphine (buprenorphine hydrochloride subdermal implant) for maintenance treatment of opioid dependence. Retrieved from http://www.fda.gov/downloads/advisorycommittees/committeesmeetingmaterials/drugs/psychopharmacologicdrugsadvisorycommittee/ucm344374.pdf

# APPENDIX D ITEM RESPONSE RATE TABLE

Question number	Description	Response rate (%)	Question number	Description	Response rate (%)
QA1	Facility is currently a SAMHSA certified OTP	100.0	QA6-2	OTP provides influenza vaccine	99.3
QA1a	Scheduled to be open 365 days a year	100.0	QA7-1	OTP routinely screens for diabetes	99.6
QA2	Have a plan or an agreement with another provider to provide contiuity of care for patients during service disruptions.	100.0	QA7-2	OTP routinely screens for Hepatitis C	99.1
QA2a-1	Hospital is the other provider	100.0	QA7-3	OTP routinely screens for HIV/AIDS	99.4
QA2a-2	Another OTP is the other provider	100.0	QA7-4	OTP routinely screens for high blood pressure	99.7
QA2a-3	Pharmacy is the other provider	100.0	QA7-5	OTP routinely screens for pregnancy	99.4
QA2a-4	Other provider	100.0	QA7-6	OTP routinely screens for heart abnormalities	99.8
QA3-1	Has formal agreement for medical referrals with an FQHC	100.0	QA7-7	OTP routinely screens for sexually transmitted infections (STIs)	99.6
QA3-2	Has formal agreement for medical referrals with a hospital	100.0	QA7-8	OTP routinely screens for sleep apnea	99.7
QA3-3	Has formal agreement for medical referrals with a medical clinic	100.0	QA7-9	OTP routinely screens for alcohol use	99.8
QA3-4	Has formal agreement for medical referrals with other OTP has written agreement permitting other providers to manage	100.0	QA7-10	OTP routinely screens for tobacco use	99.4
QA4	patient records	99.9	QA7-11	OTP routinely performs diagnostic tests for diabetes	98.4
QA5-1	Hours scheduled to dispense medications on Monday	99.3	QA7-12	OTP routinely performs diagnostic tests for Hepatitis C	98.7
QA5-2	Hours scheduled to dispense medications on Tuesday	99.3	QA7-13	OTP routinely performs diagnostic tests for HIV/AIDS	98.9
QA5-3	Hours scheduled to dispense medications on Wednesday	99.3	QA7-14	OTP routinely performs diagnostic tests for high blood pressure	98.9
QA5-4	Hours scheduled to dispense medications on Thursday	99.3	QA7-15	OTP routinely performs diagnostic tests for pregnancy	98.4
QA5-5	Hours scheduled to dispense medications on Friday	99.3	QA7-16	OTP routinely performs diagnostic tests for heart abnormalities OTP routinely performs diagnostic test for sexually transmitted infections	99.3
QA5-6	Hours scheduled to dispense medications on Saturday	99.3	QA7-17	(STIs)	99.6
QA5-7	Hours scheduled to dispense medications on Sunday	99.2	QA7-18	OTP routinely performs diagnostic tests for sleep apnea	98.8
QA5-8	Hours scheduled to provide counseling on Monday	98.9	QA7-19	OTP routinely performs diagnostic tests for alcohol use	99.8
QA5-9	Hours scheduled to provide counseling on Tuesday	98.8	QA7-20	OTP routinely performs diagnostic tests for tobacco use	99.4
QA5-10	Hours scheduled to provide counseling on Wednesday	98.9	QA8-1	OTP routinely tests for marijuana at admission	99.8
QA5-11	Hours scheduled to provide counseling on Thursday	98.9	QA8-2	OTP routinely tests for cocaine at admission	99.8
QA5-12	Hours scheduled to provide counseling on Friday	98.9	QA8-3	OTP routinely tests for benzodiazepines at admission	99.7
QA5-13	Hours scheduled to provide counseling on Saturday	99.0	QA8-4	OTP routinely tests for heroin at admission	99.5
QA5-14	Hours scheduled to provide counseling on Sunday	98.3	QA8-5	OTP routinely tests for prescription opioids at admission	99.8
QA6-1	OTP provides Hepatitis B vaccine	99.7	QA8-6	OTP routinely tests for methamphetamines at admission	99.7
Continued.			•		

Question number	Description	Response rate (%)	Question number	Description	Response rate (%)
QA8-7	OTP routinely tests for other stimulants at admission	100.0	QA10-6	Number of doctoral level cnslrs (Psychologist, etc.) employed at this OTP	96.5
QA9-1	OTP routinely screens for anxiety/panic disorder	99.5	QA10-7	Number of masters level (MSW,etc.) counselors employed at this OTP	97.1
QA9-2	OTP routinely screens for bipolar disorder	99.4	QA10-8	Number of other degreed counselors (BA, BS) employed at this OTP Number of associate degree or non-degreed counselors employed at this	95.7
QA9-3	OTP routinely screens for depression	99.7	QA10-9	OTP	94.5
QA9-4	OTP routinely screens for post traumatic stress disorder	99.4	QA10-10	Total hours worked by all physicians in a typical week	95.6
QA9-5	OTP routinely screens for schizophrenia	99.4	QA10-11	Total hours worked by all registered nurses in a typical week	95.9
QA9-6	OTP routinely screens for other psychiatric conditions	100.0	QA10-12	Total hours worked by all licensed practical nurses in a typical week	95.9
QA9-7	OTP provides treatment for anxiety/panic disorder using medication	99.5	QA10-13	Total hrs worked by mid-level medical prsnl (Nurse Pract, PA, APRN, etc.)	96.4
QA9-8	OTP provides treatment for bipolar disorder using medication	98.7	QA10-14	Total hours worked by all pharmacists in a typical week	96.4
QA9-9	OTP provides treatment for depression using medication OTP provides treatment for post traumatic stress disorder using	99.4	QA10-15	Total hours worked by all doctoral level counselors in a typical week	96.5
QA9-10	medication	99.4	QA10-16	Total hours worked by all masters level counselors in a typical week	95.7
QA9-11	OTP provides treatment for schizophrenia using medication	98.0	QA10-17	Total hours worked by all other degreed counselors (BA, BS)	94.8
QA9-12	OTP provides treatment for other psychiatric conditions using medication	100.0	QA10-18	Total hours worked by all associate and non-degreed counselors in a typical week	93.6
QA9-13	OTP provides treament for anxiety/panic disorder using counseling therapy	99.4	QA11-1	OTP creates its own software and programs	98.2
QA9-14	OTP provides treament for bipolar disorder using counseling therapy	99.4	QA11-2	OTP uses commercially available software	98.2
QA9-15	OTP provides treament for depression using counseling therapy OTP provides treament for post traumatic stress disorder using	99.4	QA11-3	OTP uses paper only (No computer/electronic)	98.7
QA9-16	counseling therapy	99.4	QA12-1	OTP routinely uses this method to conduct intake activities	99.4
QA9-17	OTP provides treament for schizophrenia using counseling therapy OTP provides treament for other psychiatric conditions using	98.2	QA12-2	OTP routinely uses this method to conduct assessment activities	99.3
QA9-18	counseling therapy	100.0	QA12-3	OTP routinely uses this method to conduct treatment plans	99.0
QA10-1	Number of physicians employed at this OTP	97.5	QA12-4	OTP routinely uses this method to conduct discharge activities	99.0
QA10-2	Number of registered Nurses employed at this OTP	97.2	QA12-5	OTP routinely uses this method to conduct referral activities	98.8
QA10-3	Number of licensed practical nurses employed at this OTP Number of mid-level medical personnel (nurse practitioner, PA, APRN,	97.3	QA12-6	OTP routinely uses this method to issue or receive lab results	99.4
QA10-4	etc.)	96.9	QA12-7	OTP routinely uses this method for billing	97.4
QA10-5	Number of pharmacists employed at this OTP	97.0	QA12-8	OTP routinely uses this method for outcomes management	98.7
Continued.					

Question number	Description	Response rate (%)	Question number	Description	Response rate (%)
QA12-9	OTP routinely uses this method for dispensing medication	99.3	QB3-18	Number of patients on March 31, 2011 whose race/ethnicity is unknown	95.0
QA13	OTP computers can access the internet	100.0	QB3-19	Total number of patients on March 31, 2011 by race/ethnicity	100.0
QA13a	What type of connection does this OTP use to access the internet	98.5	QB3-20	Number of patients who were veterans on March 31, 2011	80.1
QA14	Outpatients travel one or more hours each way to this OTP	93.2	QB3-21	Number of patients who were non-veterans on March 31, 2011	80.1
QB1	Number of new patients admitted to OTP in CY 2010	99.9	QB3-22	Number of patients on March 31, 2011 whose veteran status is unknown	84.9
QB2	Number of patients in treatment on March 31, 2011	99.9	QB3-23	Total number of patients on March 31, 2011 by veteran	100.0
QB3-1	Number of male patients on March 31, 2011	95.2	QB4-1	Number of patients on March 31, 2011 in continuous treatment 0-90 days Number of patients on March 31, 2011 in continuous treatment 91-180	79.7
QB3-2	Number of female patients on March 31, 2011	95.2	QB4-2	days	100.0
QB3-3	Number of patients on March 31, 2011 with unknown gender	95.2	QB4-3	Number of patients on March 31, 2011 in continuous treatment 181-365 days	87.6
QB3-4	Total number of patients on March 31, 2011 by gender	100.0	QB4-4	Number of patients on March 31, 2011 in cont treatment > 1 yr but < 2 yrs	87.5
QB3-5	Number of patients under 18 on March 31, 2011	94.6	QB4-5	Number of patients on March 31, 2011 in cont treatment 2 or more yrs  Total number of patients on March 31, 2011 receiving continuous	87.5
QB3-6	Number of patients 18-34 on March 31, 2011	94.6	QB4-6	treatment	100.0
QB3-7	Number of patients 35-54 on March 31, 2011	94.4	QB5-1	OTP dispensed methadone on March 31, 2011	87.5
QB3-8	Number of patients 55 and over on March 31, 2011	94.6	QB5-2	Number of patients in treatment on March 31, 2011 dispensed methadone	100.0
QB3-9	Number of patients on March 31, 2011 whose age is unknown	94.6	QB5a-1	Number of patients receiving methadone for maintenance	100.0
QB3-10	Total number of patients on March 31, 2011 by age	94.6	QB5a-2	Number of patients receiving methadone for detoxification	98.6
QB3-11	Number of White patients on March 31, 2011	95.0	QB5a-3	Total number of patients receiving methadone for maintenance and detoxification	98.6
QB3-12	Number of Black patients on March 31, 2011	95.0	QB5b-1	Number of maintenance patients receiving less than 40 mg of methadone	100.0
QB3-13	Number of Hispanic patients on March 31, 2011	95.0	QB5b-2	Number of maintenance patients receiving 40-79 mg of methadone	87.5
QB3-14	Number of Asian patients on March 31, 2011	95.0	QB5b-3	Number of maintenance patients receiving 80-119 mg of methadone	87.1
QB3-15	Number of American Indian or Alaska Native patients on March 31, 2011	95.0	QB5b-4	Number of maintenance patients receiving 120 mg or more of methadone	87.3
QB3-16	Number of Native Hawaiian or other Pacific Islander patients on March 31, 2011	95.0	QB5b-5	Total number of patients receiving methadone for maintenance	87.0
QB3-17	Number of patients of two or more races on March 31, 2011	95.0	QB5c	Number of patients receiving methadone for 2 or more years	87.3
Continued			•		

Question number	Description	Response rate (%)	Question number	Description	Response rate (%)
QB5d-1	Number of patients not receiving take-home doses of methadone	100.0	QB6b-2	Number of maint patients receiving 8 to 16 mg of generic buprenorphine	70.9
QB5d-2	Number of patients receiving take-home doses of methadone for 1-7 days	82.0	QB6b-3	Number of maint patients receiving 17 to 24 mg of generic buprenorphine	70.5
QB5d-3 QB5d-4	Number of patients receiving take-home doses of methadone for 8-14 days  Number of patients receiving take-home doses of methadone for 15-30 days	81.9 81.8	QB6b-4 QB6b-5	Number of maint patients recv 25 to 32 mg of non-generic buprenorphine Number of maint patients receiving more than 32 mg of generic buprenorphine	70.2 70.5
QB5d-5	Total number of patients in B5c receiving take-home methadone doses	89.2	QB6b-6	Total number of maintenance patients in B6a receiving generic buprenorphine	70.2
QB6-1	OTP dispensed buprenorphine on March 31, 2011	99.9	QB6b-7	Number of maint patients recv less than 8 mg of non-generic buprenorphine	76.7
QB6-2	Number of patients in treatment on March 31, 2011 dispensed buprenorphine	100.0	QB6b-8	Number of maint patients recv 8 to 16 mg of non-generic buprenorphine	76.4
QB6a-1	Number of patients receiving buprenorphine for maintenance	98.9	QB6b-9	Number of maint patients recv 17 to 24 mg of non-generic buprenorphine	76.0
QB6a-2	Number of patients receiving buprenorphine for detoxification  Total number of patients receiving buprenorphine for maintenance or	98.9	QB6b-10	Number of maint patients recv 25 to 32 mg of non-generic buprenorphine Number of maint patients recv more than 32 mg of non-generic	76.4
QB6a-3	detoxification	100.0	QB6b-11	buprenorphine	76.7
QB6b-1	Number of maint patients receiving less than 8 mg of generic buprenorphine	71.6	QB6b-12	Total number of maint patients in B6a receiving non-generic buprenorphine	76.0

<sup>&</sup>lt;sup>1</sup>N-SSATS questions and item response rates can be found in the 2011 N-SSATS report, Table C.1.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, 2011 Opioid Treatment Program (OTP) and 2011 National Survey of Substance Abuse Treatment Services (N-SSATS).

## APPENDIX E WHAT IS AN OTP?

Opioid Treatment Programs (OTPs) are comprised of programs and practitioners that use opioid agonist medication to treat opiate-addicted individuals. OTPs offer methadone maintenance treatment (MMT) and many other medical and psychosocial services to people addicted to heroin or other opioids. MMT has the longest successful track record in treating patients addicted to opioids for more than one year. MMT has been shown to control withdrawal symptoms, stabilize physiological processes, and improve functionality (Appel et al. 2001; Ball & Ross, 1991). Studies have also found that MMT reduces criminality, noncompliance with HIV/AIDS therapy, and mortality associated with opioid addiction (Appel et al. 2001; Ball & Ross, 1991). Compared with treatment in other settings, such as physicians' offices or detoxification centers, OTPs provide a more comprehensive, individually-tailored program of medication therapy integrated with psychosocial and medical treatment, and support services that address most factors affecting each patient. Treatment in OTPs can also include detoxification from illicit opioids and medically supervised withdrawal from maintenance medications (Wechsbergm & Kasten, 2007; SAMHSA, 2005). Methadone is a well-studied, safe, and effective medication for the treatment of opioid addiction (Appel et al. 2001; Ball & Ross, 1991). Methadone is a Schedule II controlled substance and must be dispensed in a federally regulated environment such as methadone maintenance programs (Wechsbergm & Kasten, 2007; SAMHSA, 2005).

The Center for Substance Abuse Treatment (CSAT) developed its original Guidelines for the Accreditation of Opioid Treatment Programs between 1996 and 1999 and has periodically updated the Guidelines since then. The latest version, published in 2013, is available at

 $http://www.dpt.samhsa.gov/pdf/Federal Guidelines for Opioid Treatment 5-6-2013 revision draft\_508.pdf$ 

The following sections, based on the CSAT Guidelines, are particularly relevant to this report.

### **Obtaining OTP Certification**

Every OTP must be certified by the Substance Abuse and Mental Health Services Administration (SAMHSA). To obtain this certification, OTPs must successfully complete the accreditation process and meet other requirements enumerated in 42 CFR Part 8; have a valid accreditation status from a SAMHSA-approved accreditation body; and comply with any other conditions for certifications established by SAMHSA. In order to be certified, OTPs must appoint a program sponsor and medical director. The program sponsor and medical director must ensure that adequate patient care is being delivered and that the requirements of all pertinent federal, state, and local laws and regulations are being met. The program sponsor is responsible for the operation of the facility as well as all persons in the employ of the OTP, including practitioners, agents, and other persons providing medical, rehabilitative, or counseling services. If there is a change of sponsor, SAMHSA mandates that the OTP must submit a formal notification within 3 weeks. The medical director must be a licensed physician who has the certification to practice within the OTP's jurisdiction. He or she is responsible for administering and/or supervising all medical services performed at the facility. To

remain in compliance with SAMHSA, medical personnel (e.g. physicians, registered nurses, midlevel practitioners, and other clinical staff) providing opioid addiction treatment at the OTPs must have sufficient education, training, and necessary experience; ensure that all necessary licenses and certifications are current; and comply with credentialing requirements within their respective professions.

OTP facilities are obligated to protect the confidentiality of their patients' substance abuse records by maintaining all patient files in a database that complies with all federal and state requirements, in ordinance with Title 42 of the Code of Federal Regulations, Part 2.

#### **Requirements of OTPs**

Screening, assessment, and evaluation

Clinicians are required to conduct individual screenings of eligible patients in order to discern if the patient is able to safely withstand the subsequent assessment and treatment that follows. Screenings are typically conducted as a questionnaire or structured interview. If the patient displays one or more risk factors, the OTP must then either perform an assessment for admission or refer the patient to a more suitable treatment center. The assessment allows clinicians to determine treatment eligibility, develop a treatment plan, and establish a measure for the response of treatment. Assessments occur at admission and during treatment. It consists of substance abuse history, a physical examination, laboratory evaluation, and determination of disease morbidity. The evaluation, which is a close examination of the patient's health, mental and physical capacities, and potential to meet the goals of treatment, follows the assessment at admission. The evaluation helps clinicians in determining the initial dosage of medications and the placement of the patient into the right level of treatment.

#### **Testing**

OTPs must have designated personnel in place to provide adequate drug and alcohol testing for patients at admission and in treatment to monitor their progress while at the facility. Patients are typically tested for opiates, benzodiazepines, barbiturates, cocaine, marijuana, methadone, amphetamines, and alcohol. However, testing is not limited to these substances. The results, whether positive or negative, are addressed with patients in a prompt manner. Personnel at the OTP are required to document the results of the tests and any therapeutic interventions that follow in the patient's file.

#### Medication management

OTPs are responsible for mandating that only licensed practitioners or agents supervised by licensed practitioners can administer or dispense opioid drugs for an addiction. Agents are pharmacists, registered nurses, licensed practical nurses, or any other healthcare professionals authorized by federal and state law who are permitted to administer or dispense opioid drugs. Patients at OTPs can only receive medications that are approved by the Food and Drug Administration under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355). Methadone, levomethadyl acetate (LAAM), buprenorphine, and buprenorphine combination products are approved for the treatment of opioid addiction, according to the Food and Drug Administration. OTPs view takehome medication as a valuable incentive for patients in comprehensive maintenance treatment. Program physicians are required to use sound clinical judgment and the 8-point take-home criteria

to determine a patient's ability to handle the opioid drug for unsupervised use. They must assess and document each patient's responsibility and stability to handle opioid drug products unsupervised.

#### **Treatment**

OTPs are expected to manage the co-occurring conditions of their patients concurrently onsite. In the event that the appropriate level of care is not available at the facility, provisions must be made elsewhere for the client to receive the treatment needed. Co-occurring conditions may include: diabetes, Hepatitis C, HIV/AIDS, pregnancy, sexually transmitted infections, alcohol and other drug abuse, etc.

OTPs are also expected to maintain a Diversion Control Plan (DCP). This plan ensures that personnel at the OTP implement specific measures that reduce the chances of clients using the controlled substances, which are received as a part of legitimate treatment, as recreational drugs. The plan includes measures like periodic monitoring, toxicology screens, and counseling by medical personnel at the OTP facility.

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At Synectics, Hongwei Zhang, Doren Walker, and Leigh Henderson were responsible for the content, analysis, and writing of the report.